

# ARTthropology

Gallery & Creative Workshops for all ages.

**arthropologystudio.com**  
**info@arthropologystudio.com**  
**(903) 732 0047**

## REGISTRATION FORM

**207 E. Houston St.**  
**Sherman, TX 75090**

Artist Name : \_\_\_\_\_

School ID : \_\_\_\_\_ Age : \_\_\_\_\_ Date of Birth : \_\_\_\_\_

Address : \_\_\_\_\_

City, State, Zip : \_\_\_\_\_

Artist Home Phone : \_\_\_\_\_ Artist Cell Phone : \_\_\_\_\_

Mother's Work Phone : \_\_\_\_\_ Mother's Cell Phone : \_\_\_\_\_

Father's Work Phone : \_\_\_\_\_ Father's Cell Phone : \_\_\_\_\_

Mother's Email : \_\_\_\_\_ Father's Email : \_\_\_\_\_

Person(s) authorized to pick up your child and emergency contacts (must show picture ID)

Name : \_\_\_\_\_ Relationship : \_\_\_\_\_ Phone : \_\_\_\_\_

Name : \_\_\_\_\_ Relationship : \_\_\_\_\_ Phone : \_\_\_\_\_

Describe any health conditions : \_\_\_\_\_

Doctor's Name : \_\_\_\_\_ Doctor's Phone : \_\_\_\_\_

Current Treatment : \_\_\_\_\_

Special Instructions : \_\_\_\_\_

Does your child have allergies? Y N If yes, explain : \_\_\_\_\_

Does ARThropology LLC. have permission to use photos of your child in educational or promotional materials? Y N

I have received, read, and agree to comply with ARThropology, LLC. policy. Y N

Parent or Gaurdian Signature: \_\_\_\_\_ Date : \_\_\_\_\_

# ART CLASSES

TUITION & ARThropology, LLC. Savings Plans:

## Platinum

Sign your artist up for 48 classes and receive 15% off the annual tuition.

Breakdown:  $\$900 - 15\% = \$765 + \$25$  Registration Fee =  $\$790$

**Savings = \$135**

## Gold

Sign your artist up for 24 classes and receive 10% off the annual tuition.

Breakdown:  $\$450 - 10\% = \$405 + \$25$  Registration Fee =  $\$430$

**Savings = \$45**

## Silver

Sign your artist up for 12 classes and receive 5% off the annual tuition.

Breakdown:  $\$225 - 5\% = \$213.75 + \$25$  Registration Fee =  $\$238.75$

**Savings = \$11.25**

## Four Classes

Sign your artist up for 4 classes

Breakdown:  $\$75 + \$25$  Registration Fee =  $\$100$

Non-refundable registration fee of \$25 per child is due at the time of registration. Registration forms will not be accepted until this fee is paid. This holds your spot for the class.

Monthly Payments will be charged automatically on the first of every month.

Withdrawal from the program requirements:

If you wish to withdraw your child from ARThropology, please submit a letter of intent to withdraw to the director no later than the last day of the month preceeding the month you intend to withdraw your child.

Tuition fees will continue to accrue if no letter is received. No refunds will be given if students are withdrawn before the end of the month.

Artist Name : \_\_\_\_\_

Start Date : \_\_\_\_\_

Day & Time Of Class : \_\_\_\_\_

Mastercard/Visa/Amex : \_\_\_\_\_ Expiration Date: \_\_\_\_\_

I have received, read, and agree to comply with ARThropology, LLC. policy.    Y    N

Parent or Gaurdian Signature: \_\_\_\_\_ Date : \_\_\_\_\_

# SUMMER WORKSHOPS

TUITION:

## **Weekly Workshop**

9:00am - 3:00pm = **\$225**

## **3-Day Workshop**

9:00am - 12:00pm = **\$125**

## **2-Day Workshop**

9:00am - 12:00pm = **\$75**

Due to the limited space availability, payment is due in full when signing up for camps.

Please have your child dress for mess. We are not responsible for ruined clothing.

Artist Name : \_\_\_\_\_

Weeks : \_\_\_\_\_

Amount Due : \_\_\_\_\_

Mastercard/Visa/Amex : \_\_\_\_\_ Expiration Date: \_\_\_\_\_

I have received, read, and agree to comply with ARThropology, LLC. policy.    Y    N

Parent or Gaurdian Signature: \_\_\_\_\_ Date : \_\_\_\_\_

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Weeks : \_\_\_\_\_

Amount Due : \_\_\_\_\_

Mastercard/Visa/Amex : \_\_\_\_\_ Expiration Date: \_\_\_\_\_

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Parent or Gaurdian Signature: \_\_\_\_\_ Date : \_\_\_\_\_

# BIRTHDAY PARTIES

FEES & TIMES:

## **\$100 Booking Fee**

Includes rental of studio, coverings for table, present opening game, face painting.

In addition to the booking fee, there is a \$10 per person charge due the day of the party. A 15% gratuity is also added to the end balance for parties of 10 or more participants.

Parties with 15 participants or more require an addition 1/2 hour at \$25 per. or eliminate the present opening game.

## **Party Times**

Saturday: 10:30am - 12:00pm / 1:30pm - 3:00pm / 4:00pm - 5:30pm

Sunday: 1:00pm - 2:30pm / 3:30pm - 5:30pm

Birthday Artist Name : \_\_\_\_\_

Date of Party : \_\_\_\_\_

Time : \_\_\_\_\_

Party Option : \_\_\_\_\_

Number of Attendees : \_\_\_\_\_

Amount Due : \_\_\_\_\_

Mastercard/Visa/Amex : \_\_\_\_\_ Expiration Date: \_\_\_\_\_

I have received, read, and agree to comply with ARThropology, LLC. policy.    Y    N

Parent or Gaurdian Signature: \_\_\_\_\_ Date : \_\_\_\_\_