

CRAFT CHILDREN'S CLUB ENROLLMENT FORM – Older Group

1) PARENT NAME: _____

2) Names and ages of children you wish to enroll:

- _____ (___ years old)
- _____ (___ years old)
- _____ (___ years old)

3) If you are **NOT** a CRAFT member, you pay (1-3 children):

| | | |
|------------|------------|------------|
| 1 | 2 | 3 |
| \$40/month | \$55/month | \$60/month |

4) If you **ARE** a CRAFT member, you pay (1-3 children)

| | | |
|------------|------------|------------|
| 1 | 2 | 3 |
| \$30/month | \$40/month | \$50/month |

5) Preferred Form of Payment:

- a. Check (local bank only); b. Cash; c. Credit card

Mailing address _____

City, state _____, zip _____, home phone _____,

work phone _____, email _____

EMERGENCY PHONE NUMBER _____

Policies:

- All of the fees are due on the first day of each month, are non-refundable, and are based on 4 classes per month. The teacher will collect cash or a check. Credit card payment maybe done by visiting www.craftofalaska.com and making a donation in the appropriate amount.
- Missed class policy: attendance will be checked each class and no makeup classes; if a child missed a class due to illness, there will be no refunds.
- Supplies: CRAFT will provide supplies. Please, consider donating supplies as well.
- By signing this form, you agree to media release of your child: photos and videos will help us in club's promotion and grants applications.

Signature: _____ Date: _____