



Beyond Canvas: Creative & Multimedia  
CHANTILLY Registration Form 2026  
Rising 1<sup>st</sup> – 7<sup>th</sup> Graders

ID G0

Student 1 Name: \_\_\_\_\_ Gender \_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade in Fall 2026: \_\_\_\_  
Current US Arts weekly art class student? Yes ☐ No ☐

Student 2 Name: \_\_\_\_\_ Gender \_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade in Fall 2026: \_\_\_\_  
Current US Arts weekly art class student? Yes ☐ No ☐

(Current US Arts students can skip the following section.)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_

(Can take 2 addresses, please include the student's email address here)

E-mail: \_\_\_\_\_

Mother's Name \_\_\_\_\_ Mother's Cell Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Father's Name \_\_\_\_\_ Father's Cell Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

FULL WEEK PRICE INFORMATION			Payments	
Dates	Fees + Materials	Bank Fees for Credit Card Payment	Student 1	Student 2
Week 1: 7/13-7/17	\$450 + \$35	\$15		
Extended care (if needed)	\$50/week	\$0		
TOTAL:				

**\* NOTES**

- All classes will be held in the **CHANTILLY** location.
- Program hours: Monday - Friday 9:30AM ~ 3:30PM
- Extended care: 9:00AM ~ 9:30AM & 3:30PM ~ 6:00PM
- Students must bring their own simple lunch.
- **Early discount: -\$50/student if registered before March 29th. After March 29<sup>th</sup>, you do not receive an early discount.**
- **Payment via check/cash/online is needed to reserve a space for your child. No exceptions.**
- **Payment by checks: write & mail checks to: US Arts Center**

**Payment from online:** [www.USArtsCenter.com](http://www.USArtsCenter.com) -> Parents -> Pay Fees Online -> Pay @ Chantilly For online payment, parents need to forward the payment confirmation to [USArtsChantilly@gmail.com](mailto:USArtsChantilly@gmail.com)

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- In case of emergency, we, USARTS Center, have the authority to search for emergency care for the kids listed above.
- No refunds and no make-up for absences. Detailed [Cancellation Policy found on website](#).
- I hereby waive all rights and claims against the US ARTS Center and its team members for any liability resulting from my child's participation of any events organized by US ARTS Center.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/2026

FOR OFFICE USE ONLY				
Date	Amount Paid	Check #	Balance	Processed By