



Agar Art: Microbial Expression

ID G0

Registration Form 2025

Rising 10th Graders and Above

Student 1 Name: _____ Gender ____ DOB____/____/____ Grade in Fall 2025: ____
Current US Arts weekly art class student? Yes ☐ No ☐

Student 2 Name: _____ Gender ____ DOB____/____/____ Grade in Fall 2025: ____
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 (_____) _____ - _____

| CLASS PRICE INFORMATION | | | Payments | |
|--|----------------------|---|-----------|-----------|
| Dates | Fees + Materials | Add Fee (If using a credit card. Can only use credit card in-person.) | Student 1 | Student 2 |
| 7/21, 7/23, 7/28, 7/30, 8/4, 8/6, 8/11, and 8/13 | (\$460 + \$55) \$515 | \$15 | | |
| TOTAL: | | | | |

* NOTES

- All classes will be held in **VIENNA location**.
- Schedule: Mondays & Wednesdays, 6:30PM ~ 8:30PM
- We will provide the following materials: variety of colorful bacteria, petri dishes, bacteria paintbrushes, aprons, cleaning supplies, safety goggles, incubator, and agar mixtures.
- Students will not need to bring anything.
- **Early discount: -\$15/student if registered before June 15th. After June 15th, you do not receive an early discount.**
- **Payment via check/cash/online/credit card (in-person payment) 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 -> Parents -> Pay Fees Online -> Pay @ Vienna For online payment, parents need to forward the payment confirmation to USArtsVienna@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 for absences.** Detailed [Cancellation Policy found on website.](#)
- Absences: For regular US Arts students, you may report absences for these classes and makeup in any *regular classes*. **Please contact Vienna office to schedule your makeup.**
- 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** ____/____/2025

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