

Digital Drawing Essentials: Rising 8th -12th Graders Registration Form 2025

ID G0

| Student 1 Name: | | Gender | _DOB | // | Grade in Fall 2025: _ | | | |
|--|---------------------------------|---|---------|--------------|-----------------------|--|--|--|
| Current US Arts weekly ar | | | | | | | | |
| Student 2 Name: Current US Arts weekly ar | | | _DOB | / <u>/</u> | Grade in Fall 2025: _ | | | |
| (Current US Arts students Address | | | State | _Zip Code | | | | |
| (Can take 2 addresses, please include the student's email address here) E-mail: | | | | | | | | |
| Mother's NameN | | Iother's Cell | Phone (|) | - | | | |
| Father's Name | nther's Cell P | hone (|) | - | | | | |
| CLASS PRICE INFORMATION | | Payments | | | | | | |
| Dates | Tuition + Technical Fees | Stud | lent 1 | | Student 2 | | | |
| 6/17, 6/18, 6/20, 6/24, 6/25, and 6/27 | \$415+\$45 | | | | | | | |
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* NOTES

- All classes will be held in CHANTILLY location.
- Schedule: Tuesdays, Wednesdays, and Fridays 1:00PM ~ 4:00PM
- We will provide hardware and software for the program.
- Early discount: -\$15/student if registered before May 11th. After May 11th, you do not receive an early discount.
- Payment via check/cash/online is needed to reserve a space for your child. No exceptions.

TOTAL:

Payment by checks: write & mail checks to: US Arts Center

Payment from online: www.USArtsCenter.com -> Parents -> Pay Fees Online -> Pay @ Chantilly For online payment, parents need to forward the payment confirmation to USArtsChantilly@gmail.com

(Continued to Page 2)



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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 the Chantilly 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 in any events organized by the US ARTS Center.

| Parent/Guardian Signature Date / /20 |
|--------------------------------------|
|--------------------------------------|

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