



# Digital Drawing Essentials: Rising 6th - 7th Graders Registration Form 2025

ID G0

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	Tuition + Technical Fees	Bank Fees for Credit Card Payment	Student 1	Student 2
7/21, 7/23, 7/28, 7/30, 8/4, 8/6, 8/11, and 8/13	\$360 + \$45	\$12		
TOTAL:				

## \* NOTES

- All classes will be held in the **VIENNA location**.
- Schedule: Mondays & Wednesdays, 6:30PM ~ 8:30PM
- We will provide hardware and software for the program.
- **Early discount: -\$15/student if registered before June 15<sup>th</sup>. After June 15<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 @ Vienna For online payment, parents need to forward the payment confirmation to [USArtsVienna@gmail.com](mailto:USArtsVienna@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 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 in any events organized by the US ARTS Center.

Parent/Guardian Signature\_\_\_\_\_

Date    /    /2025

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