

Outdoor Drawing Workshop Registration Form 2025 Rising 4th - 9th Graders

ID G0

Student 1 Name:		Gender DOB/_	/ Grad	e in Fall 2025:
Current US Arts weekly art	class student? Yes] No □		
Student 2 Name:		Gender DOB/_	/ Grad	e in Fall 2025:
Current US Arts weekly art	class student? Yes] No □		
(Current US Arts students ca				
Address		City State Zip Code		p Code
E-mail: Mother's Name Father's Name		Mother's Cell Phone (
FULL WEEK PRICE INFORMATION			Payments	
Dates	Fees + Materials	Add Fee (If using a credit card. Can only use credit card in-person.)	Student 1	Student 2
Week 1: 6/16 - 6/20	\$535 + \$15 (\$550)	\$17		
Extended care (if needed)	\$30	\$0		

* NOTES

- Schedule: Monday Friday 9:30AM ~ 3:30PM
- Extended care: 9:00AM ~ 9:30AM & 3:30PM ~ 6:00PM
- Students must bring their own simple lunch.
- No partial week option. We recommend a full week.
- **Early discount**: **-\$15**/student if registered before **May 11th**. After May 11th, you do not receive an early discount.

TOTAL:

- Payment via check/cash/online/credit card (in-person payment) is needed to reserve a space for your child. No exceptions.
- Students are responsible for purchasing their own canvases. Talk to the office if you would like to purchase a canvas with us.

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Payment hy	checks.	write & mail	checks to	US Arts Center
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Parent/Guardian Signature _____

Payment from online: <u>www.USArtsCenter.com</u> -> Parents -> Pay Fees Online -> Pay @ Vienna For online payment, parents need to forward the payment confirmation to USArtsVienna@gmail.com

- Classes will be held at different locations. Students will have the late afternoon to finish up their artwork.
- 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.

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

Date ____/2025