

Outdoor Drawing Workshop Registration Form 2026 Rising 4th - 8th Graders

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Student 1 Name:	Gender DOB	/ /	Grade in Fall 2026:
Current US Arts weekly art class student? Y	es ? No ?		
Student 2 Name:	Gender DOB	/ /	Grade in Fall 2026:
Current US Arts weekly art class student? Y	res ? No ?		
(Current US Arts students can skip the follow	ving section.)		
Address	<u> </u>	State	Zip Code
(Can take 2 addresses, please include the stud E-mail:			_
Mother's Name	Mother's Cell Phone ()	
Father's Name	Father's Cell Phone ()_	
FULL WEEK PRICE INFORMATION			Payments
	Add Fee (If using a cred	it	

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: 6/22 - 6/26	\$535 + \$15 (\$550)	\$17		
Extended care (if needed)	\$50	\$0		
	TOTAL:			

* 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: -\$50/student if registered before March 29. After March 29th, 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.
- Students are responsible for purchasing their own canvases. Talk to the office if you would like to purchase a canvas with us.

(Continued to Page 2)



artwork.

the kids listed above.

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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

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

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

Parent/Guardian Signature

• In case of emergency, we, USARTS Center, have the authority to search for emergency care for

• 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	