



Bright SPARKS

Creative Enrichment

at St Matthew's Lutheran Church
3668 Ridge Rd – Perkasié, PA 18944
Studio Phone (Ms Barb): 267-245-5938
create@theartoasis.net

Registration Winter 2025/26

Child's Name: _____ Date of Birth _____ Age _____

Home Address _____ City _____ Zip _____

List Allergies if any _____

Mother's Name _____ Phone Number _____

E-mail: _____

Father's Name _____ Phone Number _____

E-Mail _____

Emergency Contact _____ Phone _____

E-Mail _____ Relationship to child _____

Other Notes: _____

Weekly Schedule: (Select one)

Mon/Wed Morning - 9:-11:45AM
Tues/Thurs Morning - 9 - 11:45 AM

Seasonal Session Schedule: (Select one or multiple)

Holiday Session: Dec 1 - Dec 19 (3 week winter camp program)
Winter Session: Jan 5 - March 27 (12 weeks)
Spring Session: April 13 - June 19 (10 weeks)
Summer Session June 22 - July 30. (6 week summer camp program)

**No regular enrichment sessions in August. Monthly payment plans available*

Fun Friday sessions are optional and not included in the tuition; however, families enrolled in our Bright SPARKS program receive a 10% discount on Fun Fridays. Fun Fridays are designated as a family art day where you create alongside your child once or twice a month, all year round.

Session Pricing & Other information:

A \$100 registration deposit per child is needed to ensure your child's spot.
Siblings of an enrolled Explorer receive a 10% courtesy discount. If your child attended our fall 2025 session, the registration fee is waived.)

*We have a limited number of partial scholarships available for parent volunteers. Parent/grandparent volunteers must have proper clearances before volunteering. You would only volunteer for the sessions your child attends. If interested in being a parent volunteer, or if you need alternate payment options, please contact Barbara 267-245-5938 or create@theartoasis.net

Explorers may bring their own water bottle/snack (clearly labeled) and a change of clothes if desired. All Explorers must be independent with bathroom/hand-washing self-care.

Please indicate below your preferred schedule by checking off the corresponding boxes.

SEASONAL SESSION	2 Days Mon/Wed	2 Days: Tues/Thurs	Pricing Per Month / Paid In Full
Fall Session Sept 8 - Nov 21 (11 weeks)			\$295 x 3 months / \$875 PIF
Holiday Session: Dec 1 - Dec 19 (3 week winter camp program)			\$275 PIF \$125 - Single Week
Winter Session: Jan 5 - March 27 (12 weeks)			\$295 x 3 months / \$875 PIF
Spring Session: April 13 - June 19 (10 weeks)			\$295 x 3 months / \$875 PIF
Summer Session: June 22 - July 30. (6 week summer camp program)			\$125 x 6 weeks / \$725 PIF
Summer Session: June 22 - July 30. *Single weeks as room allows			\$125 - each single week as space allows

**No classes in August. Tuition is due by the 3rd of each month if paying monthly.*

I agree to pay for the above weeks according to the 2025 Tuition Guide and payment schedule. I understand that my deposit is not refundable and is separate from the tuition. I will be invoiced for the future balances that will be due within 1 week of invoice.

Parent/Guardian Signature_____Date_____

Bright SPARKS/Art Oasis Authorized Signature_____Date_____

IMAGE RELEASE & CONSENT FORM

As part of our programs, we take photographs and videos of explorers in action as they participate in our learning studio activities and special events. Most of these photos are taken in such a manner that you cannot see the child's face, or it is cropped/covered.

Please indicate below what uses of images of your child you are willing to consent to. (Check all that apply). We will only use the photographs in ways that you agree to.

In any use of these images, names and other personal information will not be identified unless we first discuss it with you. (For example: press releases or local newspaper articles if an activity or event is published with photos.) When posting on public platforms, we will use photos without children's faces unless we have direct permission to use a photo with your child's face in it.

- ☐ Images of my child(ren) may be used as part of brochures or ads.
- ☐ Images of my child(ren) may be used for press releases/newspaper publications announcing activities or events.
- ☐ Images of my child(ren) may be used in public presentations during conferences and events intended to promote programs (such as posters/brochures that may be displayed)
- ☐ Images of my child(ren) may be used on the Art Oasis/Art Explorers Club/BrightSPARKS website, Facebook, and Instagram platforms and/or newsletters.
- ☐ Images of my child(ren) may only be used on the private Facebook Group for parents
- ☐ Images of my child(ren) may be used in studio books (scrapbooks) to preserve/document projects
- ☐ Please do not use ANY images of my child(ren) in any way.

I have read the above description & give my consent for the use of the images as indicated above.

Child(ren)'s name(s): (please print) _____

Parent/Guardian Signature _____

Parent/Guardian Name (please print) _____

Date _____ (rev 3/2025)

Parent Questionnaire:
Getting to Know Your Bright Spark
Personalized Creative Learning Experiences

At Bright SPARKS, we believe every child shines in their own unique way! In addition to our regular art, science, and movement activities, we thoughtfully tailor parts of the program to reflect your child's passions, personality, and developmental needs.

Whether it's making a colorful collage, adding space-themed sensory tables for our young astronomers or building friendship-focused games for growing social confidence—your child's interests help us co-create a meaningful experience.

Please take a few minutes to fill out the questionnaire below. Your insights allow us to better support and celebrate your child!

Child's Name: _____ Birthdate: _____

Parent's Names _____

Personal Interests

1. What topics, themes, or activities make your child light up? (e.g., dinosaurs, dance, building, space, animals) _____

2. Are there certain colors, sounds, or materials your child especially loves or avoids? _____

Social & Emotional Development

3. How does your child tend to make friends or connect with peers? _____

4. Are there any areas where your child could use a little extra support (e.g., confidence, sharing, expressing feelings, holding a pencil, etc)? _____

5. What helps your child feel safe, calm, and comfortable in a new environment? _____

Learning Style & Strengths

6. What are three words you'd use to describe how your child learns best? _____

7. Is there something you'd love for us to notice, nurture, or celebrate about your child during our time together? _____

8. Siblings names/pets names: _____

9. Is there anything else you would like us to know? _____

*If you ever have any questions or would like to update this information please contact Barbara or Lauren at create@theartosis.net