

Highland Art Guild Children's Summer Art
(This program is for children 9 to 13 years of age only)

Child's Name: _____

Gender: M or F Age: _____ Birthdate: ____/____/____ Grade: _____

Medical Issues
(Allergies, etc.): _____

Household Information

Mailing address (Street, city, state, zip)

Parent/Guardian's
Name: _____

Mobile Phone: _____ Work Phone: _____

Home Phone: : _____ E-Mail: _____

Emergency Contact: _____ Phone: _____

Children's Summer Art Policy: Please discuss this with your child.

The parents of children joining the Highland Arts Guild Summer Art Program agree that the Guild is not responsible for injury, medical expense, or loss of personal property while their child is participating in the Children's Summer Art Program.

If a child/children has a medical emergency, parents give permission for him/her to be treated by a licensed medical personnel at their expense. An ambulance may be called, if deemed necessary, for transportation at the parent expense.

If a child/children is disruptive and does not choose to follow direction, parents will be called, the child/children will be dropped from the program and asked not to return.

Parents give permission, to the Guild, to copy or reproduce any artwork created by their child/children.

By signing below, parents give permission for their child/children to be videotaped or photographed for publicity purposes by the Guild.

Please have your child/children bring a snack each day. The Guild only provides water during classes.

Summer Art Class hours are from 10:00 a.m. to 12:00 p.m. The Guild expects parents to arrange suitable transportation for their child/children and for that child/children to be picked up in a timely manner. If you are chronically late your child/children will be dropped from the program.

Signature: _____

Please email this form to highlandartsgallery@gmail.com