THE ARTS HOUSE

Registration Agreement & Liability Waiver

STUDENT & PARENT INFORMATION

Student Name: _____ **Age:** _____

Parent / Guardian: _____

Email Address: _____ **Phone:** _____

Medical / Allergies / Notes: _____

PROGRAM SELECTION

- ☐ **Art Program - Group** (1 hr/wk) — **$35** / class
- ☐ **Art Program - Group** (2 hrs/wk) — **$70** / class
- ☐ **Individual Art Lessons** — **$50** / class

PAYMENT TERMS

- Tuition is paid **monthly**: cash OR e-transfer to **theartshouse.barrie@gmail.com**
- Monthly tuition depends on the # of classes in that month.
- Payment is due at the **beginning of each month**.

STUDIO POLICIES

Attendance: Please notify us as early as possible if your child cannot attend. Make-up classes offered when space is available (not guaranteed).

Statutory Holidays: No classes on Statutory Holidays.

PA Days: Classes run as scheduled on PA Days unless announced.

Extended Absence: No tuition charged for extended illness, injury, or serious family circumstances.

Withdrawal: Please provide written notice if no longer attending.

STUDIO GUIDELINES

- Please arrive on time.
- Water bottles are welcome.
- No food or chewing gum during class.
- Respect instructors, classmates, and studio materials.
- Parents are welcome to wait outside the classroom unless invited into class.
- Students should treat the studio and supplies with care.

LIABILITY WAIVER

I understand that participation in art classes involves the normal risks associated with creative activities and the use of art materials.

I release and hold harmless **The Arts House**, its owners, instructors, and staff from liability for accidental injuries or loss of personal property that may occur while participating in classes, except where required by law.

I agree to inform The Arts House of any medical conditions, allergies, or other information that may affect my child's participation.

PHOTO & VIDEO PERMISSION

Please select one option:

☐ **YES** — I give permission for my child's photographs and/or videos to be used for The Arts House website, social media, and promotional materials.

☐ **NO** — I do not give permission.

"I have read and understand this Registration Agreement and Liability Waiver and agree to abide by the policies of The Arts House."

_____ _____

PARENT / GUARDIAN SIGNATURE **DATE**