The Artful Attic
Arts & Crafts

School Year 2025/26 Registration Form

Child's First Name: _____ Child's Last Name: _____

Date of Birth: _____ Grade: _____ School: _____

Class Requested:

Arts & Crafts: Mon___ Thu___ Sat___ Sun___ Teens Thurs___ Teens Sat___

Drawing___ Adv Drawing___ Adv Painting___ Graffiti _____ Other:_____

Parents Name(s): _____

Emergency Contact Name: _____ Phone: _____

Address: _____

City: _____ State:_____ Zip Code:_____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Allergies to food or Art Supplies? _____ Please explain: _____

Other Information about the child: _____

Names of Persons Authorized to pick-up:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Pick-up/Drop-off: Please drop-off child promptly at the beginning of the scheduled class and sign the child in. At the end of the session, please pick-up on-time and sign the child out of the class.

Photographs: The Artful Attic is granted permission to use group photographs or images taken during the class for promotional purposes YES _____ NO _____

Activities: Art activities including paints, glues, pastels, chalk, pencils, pens, markers, yarn, fabrics, papers, wax, plastic bags, plaster, soaps and cleansers may be used within a class sessions. The Artful Attic takes all possible precautions to provide a safe, healthy and enjoyable setting. I warrant thay my child is able to follow directions for these activities and I acknowledge the risk for particapation in the class activities and that I allow my child to attend class knowing these risks and consequences, including personal injury.

Waiver of Liability: As the parent or guardian of the above child, I agree that I will not hold The Artful Attic or Business Alternatives, Inc. liable for any personal injury, property damage or loss of insurance. I agree to release and hold harmless The Artful Attic and Business Alternatives, Inc. from all liability incurred as a result of my child's participation in the art classes and that these terms serve as a release for myself, volunteers, property owners and members of my family.

Parent/Guardians Name (Print) _____

Parent/Guardians Signature: _____

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