



## CLASS REGISTRATION FORM

First Student Name _____	Second Student Name _____
Age: _____ Birth date: _____	Age: _____ Birth date: _____

### Parental Contact Information

Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Parent's email address: \_\_\_\_\_ Okay to send information via email?  Yes  No

### Emergency Information

Contact Name/Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Allergies/Medical Conditions: \_\_\_\_\_

### Class Selection - Start date: \_\_\_\_\_

- Art for ages 6 to 10  Tuesday 3:30 – 4:30  Wednesday 2:00 – 3:00
- Art for ages 10 to 15  Wednesday 3:15 – 4:45
- Art for Adults - currently not scheduled, contact me if interested

Art for ages 6 to 10	1 hr session 4 weeks	\$80 BAM member # _____ \$85 non-member <i>Register for three 4 week sessions (12 weeks) and receive a 5% discount.</i>
Art for ages 10 to 15	1 1/2 hr session/ 4 weeks	\$108 BAM member # _____ \$113 non-member <i>Register for three 4 week sessions (12 weeks) and receive a 5% discount.</i>
Art for Adults*	1 1/2 hr session/ 8 weeks*	\$216 BAM member/\$226 non-member

All classes are ongoing.

\* The initial "Art for Adults" session is 8 weeks to explore various techniques, mediums and fundamentals. The class is ongoing after that, at 4 week sessions, focusing on requested topics.

I agree \_\_\_\_\_ disagree \_\_\_\_\_ that photos of my child creating art and or art produced at Julie's **ARTCLASS** may be used in publications or art shows or the **ARTCLASS** website.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please make checks payable to: Julie Hammerquist. I do not take credit cards.  
Send your completed registration form and payment to:

Julie Hammerquist  
6520 108<sup>th</sup> Ave. NE  
Kirkland, WA 98033