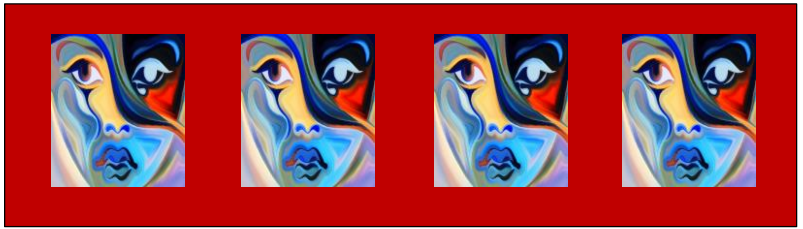




PFAA

palencia fine arts academy

fine art instruction & gallery



SUMMER ART 2016 REGISTRATION FORM

STUDENT

Child's Name _____
 Street Address _____ City _____ Zip Code _____ State _____
 Date of Birth _____ Age _____ (Must be 6 years old by the first day of class) Gender _____
 How did you hear about the Academy? _____

PARENT

Mother's Name _____
 Mother's Address _____

 Email Address _____
 Mother's Home Phone _____
 Mother's Day time Phone _____
 Mother's Cell Phone _____

Father's Name _____
 Father's Address (if different) _____

 Email Address _____
 Father's Home Phone _____
 Father's Day time Phone _____
 Father's Cell Phone _____

Person Permitted to Remove Child:

Mother Y N and/or Father Y N

Legal Custody:

Mother Only Father Only Both Parents
 Legal Guardian _____

Persons to be contacted in case of illness, accident or emergency if parents or guardian cannot be reached, and authorized to remove child from facility. *Identification will be required.* Please inform all authorized persons of this policy.

Name _____ Relation to Child _____
 Phone _____ Work _____ Cell _____

Name _____ Relation to Child _____
 Phone _____ Work _____ Cell _____

Name _____ Relation to Child _____
 Phone _____ Work _____ Cell _____

LIABILITY AND MEDICAL RELEASE

I understand that Palencia Fine Arts Academy assumes no responsibility for injuries or illnesses that my child may sustain as a result of his/her physical condition or resulting from his/her participation in any activity, program, field trips, the use of any equipment, or any other activities/ material of any kind whatsoever. I expressly acknowledge that I assume the risk for any and all injuries and illnesses that may result from his/her participation in Academy activities or field trips. In consideration of the privilege of participating in Palencia Fine Arts Academy activities or programs, I hereby voluntarily release and discharge Palencia Fine Arts Academy, its agents, officers, supervisors, staff, and employees from any and all claims for injury, illness, death, loss or damage of any kind whatsoever that I or my child may suffer as a result of his/her participation in these activities.

While Palencia Fine Arts Academy will make every attempt to provide reasonable accommodations for mentally and physically challenged children, Palencia Fine Arts Academy will not accept children that are (1) of danger to themselves, (2) of danger to others, or (3) a disruption to the normal activities making it unreasonably difficult for other children to enjoy Palencia Fine Arts Academy programs. Any of the above reasons will be grounds for dismissal from Palencia Fine Arts Academy programs. We strongly recommend that you discuss with Palencia Fine Arts Academy staff any special conditions or circumstances involving your child. We request that you do this PRIOR to registration so that we can advise you as to whether we can make reasonable accommodation for your child.

I understand that Palencia Fine Arts Academy is NOT responsible for personal property lost or stolen while students and/or program participants are using Palencia Fine Arts Academy facilities, Palencia Fine Arts Academy premises OR while engaging in Palencia Fine Arts Academy sponsored field trips including The Cummer Museum.

I understand that no accident or medical insurance is provided with this activity.

PLEASE NOTE IN AN EVENT OF AN EMERGENCY/ ACCIDENT OR ILLNESS PLEASE GIVE PALENCIA FINE ARTS PERMISSION TO CALL 911 AND ENLIST THE SERVICE OF PARAMEDICS.

MEDIA RELEASE

I give my permission to Palencia Fine Arts Academy to use, without limitation or obligation, photographs, website promotion, film footage or tape recordings that may include my child's image or voice for purposes of promoting or interpreting Palencia Fine Arts Academy programs



I DO accept for my child to be photographed for gallery and community publications.



I do NOT accept for my child to be photographed for gallery and community publications.

AUTHORIZATION FOR MEDICATION

Child's Name: _____

Medicine: _____

Time to be given: _____

Amount to be given: _____

Special instructions: _____

Known allergies _____

Other important medical information _____

Please list any physical limitations _____

Sign below, if not applicable to your child:

Parent Signature

Date

POLICIES AND PROCEDURES

For the safety and enjoyment of all the children we have the following policy in place:

- First, a verbal warning is given.
- Second, a written warning is sent home with the child.
- As a last resort, if the written warning is not heeded, the child will be suspended from the Summer Art Program.

If your child should create a disturbance and become unmanageable, we will be required to have a parent or guardian pick up your child. Future attendance at PFAA will be reviewed on a case-by-case basis by staff. There will be NO REFUNDS if your child is released from any program.

While the Palencia Fine Arts Academy will make every attempt to provide reasonable accommodations for mentally and physically challenged children, the Palencia Fine Arts Academy will not accept children that are (1) of danger to themselves, (2) of danger to others, or (3) a disruption to the normal activities making it unreasonably difficult for other children to enjoy Palencia Fine Arts Academy programs. Any of the above reasons will be grounds for dismissal from Palencia Fine Arts Academy Programs. We strongly recommend that you discuss with the Palencia Fine Arts Academy staff any special conditions of circumstances involving your child. We request that you do this PRIOR to registration so that we can advise you as to whether we can make reasonable accommodations for your child.

NO REFUNDS

I hereby agree to inform Palencia Fine Arts Academy of any changes in my child's scheduled attendance in writing. I understand that the tuition is **non-refundable**.

By filling out this form you're agreeing to ALL gallery procedures, policies, liability and medical release.

Parent Signature

Date

CHOOSE YOUR PROGRAM

WALL HANGINGS: PAINTING ON FABRIC

CLASS	FEE \$70	MATERIAL FEE \$15	SIBILING DISCOUNT \$5	TOTAL
Wednesday, June 8th 10:00am – 2:00pm Ages: 9+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CLASS	FEE \$70	MATERIAL FEE \$15	SIBILING DISCOUNT \$5	TOTAL
Wednesday, June 15th 10:00am – 2:00pm Ages: 9+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CLASS	FEE \$70	MATERIAL FEE \$15	SIBILING DISCOUNT \$5	TOTAL
Wednesday, July 20th 10:00am – 2:00pm Ages: 9+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CLASS	FEE \$70	MATERIAL FEE \$15	SIBILING DISCOUNT \$5	TOTAL
Wednesday, July 27th 10:00am – 2:00pm Ages: 9+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CHOOSE YOUR PROGRAM

TILE MOSAICS: DECORATIVE WALL ART PROJECTS

CLASS	FEE \$70	MATERIAL FEE \$20	SIBILING DISCOUNT \$5	TOTAL
Thursday, June 9th 10:00am – 2:00pm Ages: 9+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CLASS	FEE \$70	MATERIAL FEE \$20	SIBILING DISCOUNT \$5	TOTAL
Thursday, June 16th 10:00am – 2:00pm Ages: 9+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CLASS	FEE \$70	MATERIAL FEE \$20	SIBILING DISCOUNT \$5	TOTAL
Thursday, July 21st 10:00am – 2:00pm Ages: 9+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CLASS	FEE \$70	MATERIAL FEE \$20	SIBILING DISCOUNT \$5	TOTAL
Thursday, July 28th 10:00am – 2:00pm Ages: 9+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CHOOSE YOUR PROGRAM

MOBILES: HANGING MOBILES

CLASS	FEE \$70	MATERIAL FEE \$20	SIBLING DISCOUNT \$5	TOTAL
Wednesday, June 22nd 10:00am – 2:00pm Ages: 9+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CLASS	FEE \$70	MATERIAL FEE \$20	SIBLING DISCOUNT \$5	TOTAL
Wednesday, June 29th 10:00am – 2:00pm Ages: 9+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Payment Method:

- Check (payable to PFAA)
- Cash

TOTAL AMOUNT