



# PFAA

palencia fine arts academy  
fine art instruction & gallery

## YOUTH 2015 - 2016 REGISTRATION FORM

### ANNUAL FEE'S

Registration \$25  
Material \$80

### MONTHLY CLASS FEE'S

Group Class Fee \$70  
Semi-Private Fee \$85  
Sibling Discount \$5 (*monthly tuition only*)  
**Make checks payable to PFAA**

## STUDENT

Child's Name \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Age \_\_\_\_\_ Class \_\_\_\_\_  
How did you hear about us? \_\_\_\_\_

## PARENT

Mother's Name _____	Father's Name _____
Mother's Address _____	Father's Address (if different) _____
_____	_____
Email Address _____	Email Address _____
Mother's Home Phone _____	Father's Home Phone _____
Mother's Day time Phone _____	Father's Day time Phone _____
Mother's Cell 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, 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. 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 or on Palencia Fine Arts Academy premises. 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.

# 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 PFAA.

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.**

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Parent Signature

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Date