Session:

illage Center for the Arts A Non Profit Community Fine Art Center

Student Registration Form

How did you hear about VCA?

Name:	Activity:	oday's Date: Start Date :
Age: Check if Adult Gender: Street Address: Zip: Home/Cell Number: E-Mail: [Please Write Clearly) Student Lives with: Spouse, SO, Parent(s), Sister(s), Brother(s) (circle all that apply) Student Lives with: Spouse, SO, Parent(s), Sister(s), Brother(s) (circle all that apply) Are there allergies or behavioral issues we should know about in order to keep your child safe? Please use back of this form. Please Call with any questions. 860-354-4318 In the event of an emergency and I cannot be reached, I hereby give my permission for the Village Center Instructor or their staff to obtain the child. I leave permission and understand that Village Instructors, their staff, or emergency services will provide transportation to New Magner to hold harmless, the Village Center for the Arts, Inc., its agents, employees and independently contracted instructors, against and to	STUDENT INFORMATION:	PARENT/GUARDIAN INFORMATION:
Age: Check if Adult Gender: Street Address: Zip: Home/Cell Number: E-Mail: [Please Write Clearly) Student Lives with: Spouse, SO, Parent(s), Sister(s), Brother(s) (circle all that apply) Student Lives with: Spouse, SO, Parent(s), Sister(s), Brother(s) (circle all that apply) Are there allergies or behavioral issues we should know about in order to keep your child safe? Please use back of this form. Please Call with any questions. 860-354-4318 In the event of an emergency and I cannot be reached, I hereby give my permission for the Village Center Instructor or their staff to obtain the child. I leave permission and understand that Village Instructors, their staff, or emergency services will provide transportation to New Magner to hold harmless, the Village Center for the Arts, Inc., its agents, employees and independently contracted instructors, against and to		Parent:
Age: Check if Adult Gender: Baytime Phone: E-mail: Baytime Phone: Baytime P		Cell Phone:
Town:	Check if Adult Gender:	Daytime Phone:
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E-Mail: (Please Write Clearly) Student Lives with: Spouse, SO, Parent(s), Sister(s), Brother(s) (circle all that apply) Other Emergency Contact: Name: Relationship: Phone: Doctor: Please use back of this form. Please Call with any questions. 860-354-4318 In the event of an emergency and I cannot be reached, I hereby give my permission for the Village Center Instructor or their staff to obtain the child. I hereby authorize any health care provider to rely on this consent for treatment for my child. I give permission and understand that Village Instructors, their staff, or emergency services will provide transportation to New Magree to hold harmless, the Village Center for the Arts, Inc., its agents, employees and independently contracted instructors, against and from Magree to hold harmless, the Village Center for the Arts, Inc., its agents, employees and independently contracted instructors, against and from Magree to hold harmless, the Village Center for the Arts, Inc., its agents, employees and independently contracted instructors, against and from Magree to hold harmless, the Village Center for the Arts, Inc., its agents, employees and independently contracted instructors, against and from Magree to hold harmless, the Village Center for the Arts, Inc., its agents, employees and independently contracted instructors, against and from Magree to hold harmless, the Village Center for the Arts, Inc., its agents, employees and independently contracted instructors, against and from Magree to hold harmless.	State: Zip:	
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SIGNED DATE	SIGNED	DATE
CANCELLATION POLICY	*CANCELLA	ION POLICY*

session by one more day for 1/6 of the Club Mud fee.

If you do not inform us of an impending absence, the day will be counted as part of the 6-week session with no make-up class offered.

When there is a "no school day" during the school year, there is no class and class is extended by one week. If school closes early due to weather there will be no Club Mud, however students can still come for Open Studio.

Make Checks Payable to: Village Center for the Arts 12 Main Street New Milford, CT 06776

My Child may have his/her photo on:

a. Facebook with name___ with no name___ Not on FB at all___

b. VCA website with name__with no name__Not at all___

C. Advertising or posters with no name____ not at all___

villagecenterarts.com