

# Village Center for the Arts

A Nonprofit Community Fine Art Center

## Student Registration

How did you hear about VCA? \_\_\_\_\_

Class/ Activity: \_\_\_\_\_ Today's Date \_\_\_\_\_ Start Date \_\_\_\_\_

### STUDENT INFORMATION:

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Gender \_\_\_\_\_

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

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home/Cell Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_  
(Please Write Clearly)

Student Lives with: Spouse, SO, Parent(s),  
Siblings  
(check all that apply)

School (if applicable): \_\_\_\_\_

Are there allergies or behavioral issues we should know  
about in order to keep your child safe? Please use back  
of this form.

### PARENT/GUARDIAN INFORMATION:

Parent: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Parent: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

#### Other Emergency Contact:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Doctor: \_\_\_\_\_

Phone: \_\_\_\_\_

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 treatment for my child. I hereby authorize any health care provider to rely on this consent for treatment for my child. I give permission for treatment provided by EMTs and by staff trained in first aid. I give permission and understand that Village Center Instructors, their staff, or emergency services will provide transportation to New Milford Hospital. I agree to hold harmless, the Village Center for the Arts, Inc., its agents, employees and independently contracted instructors, against and from all liabilities, claims, costs, charges, and the like, due to any injury to my child, and/or treatment arising from my child's participation.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

#### **\*CANCELLATION POLICY\***

- If the student is sick, and you inform us **prior** to the class time, the student may extend their session by one week.
- If a project is starting on the week they must extend to, then your child may need to work on a smaller scale and/or extend their 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

By signing, I authorize Village Center for the Arts to record on video tape, photography, voice recording, or interview through print or other media, my child's first name, voice, image, artwork, and or performance for informational programs, reports, and promotional materials to be used for non-commercial purposes. I understand that neither my child nor I will receive compensation for this appearance and no private individual will receive compensation of any kind as a result of broadcasting this material.

**villagecenterarts.com**

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