

# REGISTRATION FORM

**Questions? Call Art Station at 617-1317.**  
Office hours are Monday through Friday, 10 am–5pm.



Today's Date \_\_\_\_\_ Name/Parent/Guardian \_\_\_\_\_  
LAST FIRST

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_

PARTICIPANT NAME		AGE	CLASS (Write complete class title)	Supervised Camp Lunch?	SESSION	DATE	TIME	FEE
LAST	FIRST			Yes No				
LAST	FIRST			Yes No				
LAST	FIRST			Yes No				
LAST	FIRST			Yes No				

## Notification of Class Enrollment.

Good news is NO news! Unless you hear from us, go to class! REGISTRATION is open until class begins. Please register early! Dress for mess—it's an art class!

## Liability, Medical & Publicity Release

I, the participant or the parent/guardian of the above named participant, understand the possibility of injuries resulting from the activities listed above sponsored by the Art Station and A6. I hereby acknowledge and accept all risks and hazards incidental to participation in such activities. I hereby release, absolve, indemnify and hold harmless the Art Station, Arts Central, A6, and its directors, employees and agents. I understand there is no insurance coverage provided by the Art Station or A6 for participants and that such coverage constitutes a responsibility of the participant and/or the undersigned. I hereby consent to emergency medical treatment of participant to ensure prompt treatment, and I understand that such treatment may be provided by either a licensed physician or trained emergency care technician. I consent and authorize the Art Station or A6 to take participant's photograph for education and publicity purposes. Payment of fees and participation in program shall constitute acceptance of this liability, medical and publicity release. *Please notify staff before class starts if your child has special needs.*

<b>SUBTOTAL</b>		
Arts Central Members deduct 10% off Art Station class		–
A6 Members deduct 10% / A6 Supporters deduct 20% off A6 class		–
Supervised Camp Lunches \$25/wk x ____ weeks		
<b>Purchase Arts Central Membership (see page 3)</b>		
<b>Purchase A6 Membership (see page 19)</b>		
<b>TOTAL</b>		

Fill out this form and mail or drop off at the Art Station, 313 SW Shevlin Hixon Dr., Bend OR 97702. You can also fax your registration to 617-1439.

### MAKE CHECKS PAYABLE TO ARTS CENTRAL.

\$15 processing fee for returned checks.

REQUIRED SIGNATURE: Participant/Parent/Guardian \_\_\_\_\_

DATE \_\_\_\_\_

Credit Card/Debit (VISA & MasterCard) # \_\_\_\_\_

Expiration Date \_\_\_\_\_