

2009-2010 Art Class REGISTRATION FORM

Student(s) Name(s) _____ Age _____ D.O.B. _____ M/F _____

Parents' Names _____

Address _____ City _____ State _____ Zip _____

Home & Work Phones _____ Email _____

DAY	CLASS	TIME	AGES	REGISTER WHEN YOU WRITE STUDENT NAME(S) BELOW:
WED	DRAWING AND PAINTING	3:30-5:00pm	7-10	
WED	MANGA & CARTOONING	5:00-6:30pm	9 & UP	
TH	ART EXPLORATION	4:00-5:30pm	4-6 & 7-10	
FRI	HomeSchool ART CLASS	Fri 1:30-2:30/3:00pm Choose: 1 hr or 1.5hr	4-6, 7-10, 11 & UP	
FRI	ART EXPLORATION	4:00-5:30pm	4-6 & 7-10	
FRI	CLAY & POTTERY	4:00-5:30pm	7 & UP	
FRI	PRE-STUDIO: <i>Beginning/Intermediate</i>	5:30-7:00pm	11 & Up	
FRI	SEMI-INDEPENDENT: <i>Advanced</i>	5:30-7:00pm	13-18	
SAT	ART EXPLORATION	10:00-11:30am	4-6 & 7-10	

Write-In Class:

Day:	Class/Workshop:	Time:	Course Fee:
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Fall Term \$234 for 13 weeks (September 9 - December 12)

Winter Term \$198 for 11 weeks (January 6 - March 20)

Spring Term \$180 for 10 weeks (March 31 - June 5)

DROP-INS \$20 Refer a brand new student who registers and receive tuition credits for 2 classes!

HomeSchool students, please contact the studio for tuition information.

Tuition includes small group instruction, all supplies, and a "not-to-be-missed" student art show for students who continue through Spring Term! If you are unable to start on the first class, tuition is prepaid and pro-rated, based on your start date.

REGISTER BY MAIL with a \$20 Non-Refundable Registration Fee (check, cash, money order or VISA) *per class per student* to: Fine Art Starts PO Box 1082 Oregon City, OR 97045. Registration fee goes towards tuition when you arrive for your first class.

REGISTER BY FAX/PHONE with a \$20 Non-Refundable Registration Fee *per class per student* paid by completing the credit card information below. Yes, your Registration Fee DOES go towards tuition when you arrive for your first class. **Tel: (503)723-9661 Fax: (503)723-6681**

YES, I have fully read and understand F.A.S.' Registration, Refund and Cancellation Policies. Initial here: _____

Please charge my VISA/MC: _____ Exp: _____ Signature: _____
Credit Card Number By signing above I authorize F.A.S. to charge my Registration Fee to my credit card.