



Date \_\_\_\_\_

41 Commonwealth Boulevard  
Bellerose, New York 11001  
www.youheartart.com  
516-216-5377

# CLASS REGISTRATION

Child's Name \_\_\_\_\_ Caregiver \_\_\_\_\_

Birth Date \_\_\_\_\_ Child's Grade/Age \_\_\_\_\_

Parents Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Cell \_\_\_\_\_ Relationship \_\_\_\_\_

Please list any medical conditions, allergies or special concerns:  
\_\_\_\_\_

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

We often photograph our classes for use on our website, facebook page and other marketing materials. If you do NOT want your child or yourself photographed, please check box and initial. \_\_\_\_\_

## Class/Fees

**Total:** \_\_\_\_\_

## **Policies**

Classes consist of multiple sessions that meet once a week on a specific date. A maximum of two make-ups classes will be allowed. Make-up classes must be completed by the end of current term. ALL PRICES INCLUDE MATERIALS. \$50 non-refundable desposit is due at registration. Balance of the payment due the day of first class. Cash, check, and credit accepted; make checks payable to Party Art Studio, LLC. Refunds: Full tuition minus \$50 deposit if cancelled prior to second class; no refund or credits thereafter. We offer a 10% sibling discount, please ask for details.

<b>Office Use</b>	
<input type="checkbox"/> Registration fee	<input type="checkbox"/> Form on File
<input type="checkbox"/> Paid in Full	<input type="checkbox"/> DO NOT PHOTOGRAPH