

# SPRING 2024 ART WORKSHOP After-School Art Workshop Registration Form April 2 – June 21, 2024

Please select class.

Ages 5-7 Creative Cats After-School Arts	Ages 8-13 Art Explorers After-School Arts			
Monday, April 8 - June 10	Tuesday, April 2 - June 18			
7-sessions/4-5:30pm/\$455	10-sessions, 3:30-5:30pm/\$650			
School Pick-Up at 2:30pm/\$140	School Pick-Up at 2:30pm/\$200			
Wednesday, April 3 - June 12	Thursday, April 4 - June 20			
9-sessions, 4-5:30pm/\$585	10-sessions, 3:30-5:30pm /\$650			
School Pick-Up at 2:30pm/\$180	School Pick-Up at 2:30pm /\$200			
	Friday, April 5 - June 21			
	8-sessions, 3:30-5:00pm /\$520			
	School Pick-Up at 2:30pm /\$160			
Please complete, initial where indicated, sign a	and return. This form is good for the school year.			
Child's Full Name:	Age:Child's Birth Date:			
Child's School:	Child's Grade:			
Do you need school pick-up? Y N	Child's Teacher & Room Number			
Name & Phone Number for Nanny/Babysitter o	or Pick-Up Adult:			
Parent/Guardian 1:	Phone Number:			
Email:				
Address: City:	State: Zip:			

Parent/Guardian 2:	Phone Number:		
Email:			
Address:	City:	State:	Zip:
How Can We Work Bette If you have any suggestions	er with Your Child? on how our teachers can work	better with your child, please	e let us know here:
Please let us know your o She/Her He/Him They/Them Other	child's preferred pronoun(s):		
If other, please provide add	itional information so we can d	o our best to make your child	feel seen and comfortable.
treatment for my child, w	on to Barking Cat Studio, Inc vith the understanding that t the session, I am responsible	the family is notified as soc	on as possible. If my child
Pre-Existing Conditions Does your child have any session? If so, please list	medical needs or accommo them here:	dations that could affect t	heir participation in the
<b>Allergies</b> Does your child have any	allergies? If so, please list th	nem here:	
<b>Epi Pen or Inhaler</b> Does your child require a each visit to the studio.	n Epi Pen or inhaler? If so, st	taff MUST be informed wh	ere pen/inhaler is upon
YesNo			
<b>Pick-Up</b> Please list the names and	I phone numbers of the peo	ole who are approved to p	ick-up your child:

Does your child have an individual in their life that has a restraining order or similar order of no contact? If so, please provide additional information on that person.

# **School Pick-Up**

If you are interested in school pick-up, please indicate your child's school, teacher and room number here:

Where does your school's dismissal take place? (Example: school yard)

What is the school's pick-up policy in the rare event that we are late getting to the school?

#### COVID19 Policy-

We have relaxed our Covid19 policies. All instructors are vaccinated and boosted. Masks are not required at this time.

If your child has any symptoms or has been in contact with a person with COVID19, they cannot attend the session. Do not send a sick child to class.

If exposure to COVID19 forces a shut down, we will shut down the in-person portion of the session for the required time based on guidelines set by the CDC and offer classes virtually. If we have to switch from in person to virtual, no refund or class credit will be given. The session will immediately switch to full virtual via Zoom. In this unlikely event, Barking Cat Studio will provide class materials and will coordinate project materials pick-up with you.

You agree that you will not hold Barking Cat Studio, Inc. responsible if you or your family contracts COVID19.

You agree that you will not send your child if they have symptoms or been in contact with a person with COVID19.

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#### **Terms**

I agree to the following terms:

I represent that I am the parent or legal guardian of the child I am enrolling, who is participating in a session, Workshop or other event (hereinafter the "Workshop") by or with Barking Cat Studio, Inc. (hereinafter "BCS").

I hereby certify that my child is in good health and that my child has no limitations that with or without a reasonable accommodation would preclude his/her safe participation in the Workshop.

I hereby give my authorization and approval for my child's participation in any and all of the activities of the Workshop. I further acknowledge and agree that participation in the Workshop involves creating art and sometimes includes working with materials that can stain clothes. Art classes for kids ages 5+ may involve working with or sharp or hot tools, and/or materials that can stain or damage clothes, further, that these activities are can be hazardous and that risks include physical injury and property damage. Specifically, my child may be using materials and components in the Workshop including but not limited to permanent marker, paint and other art materials that may stain, magnets, hammers and screwdrivers, small metal and plastic pieces, sharp knives and other sharp tools, paper cutters and hot tools.

I further acknowledge that the above list is not inclusive of all possible risks associated with the Workshop and that the above list in no way limits the extent or reach of this release. By enrolling my child in the Workshop, I agree to release, indemnify and hold harmless on behalf of myself, my heirs, representatives, executors, administrators, and assigns BCS, its officers, agents and employees from any cause of action, claims, or demands of any nature whatsoever, including but not limited to a claim of negligence, which I my heirs, representatives, executors, administrators, and assigns may now have or have in the future against BCS, on account of any personal injury, property

damage, death or accident of any kind arising out of or in any way related to my child's enrollment in the Workshop.

Through my acceptance below, I acknowledge that I have read this Agreement and understand that it includes an assumption of the risk and a release of liability. I understand that BCS is relying on this waiver in allowing my child to participate in the Workshop.

#### **Other Policies**

I understand that BCS reserves the right to ask my child to leave the session if it is determined that he/she is a danger to themselves or others or is in any way disruptive to the Workshop. Any decision made by BCS in this regard will be in BCS's sole discretion. BCS asks that the parent/guardian disclose all pertinent information regarding their child's past school experiences and/or behavior so we may help you decide if our session is appropriate for your child. If the parent withholds information pertaining to special needs, behavioral, physical or other and it is determined that BCS is not appropriate for your child, no refunds will be given. If we find out that your child does not meet the age requirements for the session, your child may be asked to leave and no refund will be made. Similarly, if your child is asked to leave the session for any reason, no refund will be made. In the event this occurs, a parent/caregiver will be contacted.

## **Upon Entrance to the Session**

I agree that my child cannot enter the session until this application has been signed and submitted and full payment is to be made. I have read and understand the above information and agree to its terms.

### **Photo and Video Release**

I represent that I am a custodial parent or legal guardian of the child I am enrolling, and I hereby grant permission to Barking Cat Studio, Inc. to photograph or record on video tape all class activities and to use any photograph or video in which my child appears in for promotional literature, displays or any other format representing Barking Cat Studio, Inc. to the community including the Barking Cat Studio, Inc. website. I release all rights to such.

I agree to these terms	
Name:	Date:
Signature:	Relationship: