Registration Form

2020 Kids Workshops/Camps

Student Information

First Name: _____ **Last Name:** _____

Gender: _____ **Birth Date:** _____

School: _____ **Age:** _____

Address: _____ **Phone Number:** _____

Please list any allergies or medical conditions your child may have:

_____

Payment:	**Cash**	□
	Cheque	□
	E transfer	□

Contact #1 **Last Name:** _____ **First Name:** _____

Relation to student: _____

Home Phone: _____ **Cell #**_____

Email: _____ (Emails are kept confidential)

Contact #2 **Last Name:** _____ **First Name:** _____

Relation to student: _____

Home Phone: _____ **Cell #**_____

Email: _____ (Emails are kept confidential)

Home address: _____

Emergency contact: _____

How did you learn about us: _____

Release of Liability

The applicant agrees that Stray Dog Art House or/and its proprietors will not be held responsible for any accidents or losses and agrees to release the proprietors from all claims of damages that may arise as a result of such accident or loss.

□ **I've read the above and agree**

Media and Picture Policies

I consent to have pictures of my child taken during art class to be posted on Stray Dog website, bulletin boards, office walls and other forms of media for publicity purposes. Also any art produced during this session may be displayed in our studio/digital gallery and print media for program or promotional purposes.

□ **I've read the above and agree**

Please note: We accept cheques, cash or e-transfers to info@straydogarthouse.com at this time.

Print your full name: _____ **Signature:** _____

Relation to student: _____ **Date:** _____