

Sparta S.A.W. JUNIOR Registration Form 2016

www.spartasummerarts.org



Date: ___/___/___

Student's Full Name: _____

Sex (circle): M F

Last

First

Address: _____

Street

Town

Zip Code

Parent or Guardian: _____

Home Phone: () _____ Work Phone: () _____

Cell Phone: () _____ E-Mail: _____

School Student Attended 2015/16 _____ Grade in 2016/17 _____

Primary Musical Instrument: _____ Secondary Musical Instrument: _____

T-shirt Size (Adult Sizes): XS S M L

Carpool Information:

If you are interested in participating in a carpool, please check the box and fill in the contact information you would like to share with others also interested in carpooling.

Carpool Best Contact Phone #: _____

Other Carpool Information (anything you feel we might need to know):

Publicity/Media Parental Consent

I understand The Sparta Summer Arts Workshop prints photographs of students (*in groups, without identification*) for advertising and archiving purposes in brochures, newsletters, newspapers and the web. As part of the registration requirements, please sign below:

Parent/Guardian

MEDICAL INFORMATION

Person to contact in case of emergency: Name: _____ Phone Number: _____

Please state any pertinent medical information:

Medical Release

I give the personnel at the Summer Arts Workshop my permission to seek and approve emergency medical care for my child, _____, in the event that an emergency occurs and I cannot be located.

Parent/Guardian

Date

Continued on the next page

Junior Scheduling & Tuition

Registration for: _____ Page 2

Student Name

If you are interested in changing it up with a class other than the four available Junior courses, please circle the specific class (There is a limit of one alternate class):

	PERIOD ONE	PERIOD TWO	PERIOD THREE	PERIOD FOUR
JUNIOR COURSES	Saturday Night Live	Chorus for Everyone	Lip Syncs of Broadway	Characters / Choreography
ALTERNATE COURSES	Digital Photography	Digital Photography	Computer Animation	Art of The Sketchbook
	Fashion, Fashion, Fashion		Masters of Art	Intro To Medium
	Knit & Crochet			

TUITION

Please check the appropriate number of sessions, then tabulate the balance due on the line provided.

We request a \$20 late fee for applications submitted after June 17th.

(It is recommended that each student register early to insure their first class choices and to register for the five-week session to receive the full arts program).

Primary Child

- [] 5 Week Full Session \$350.00
- [] 4 Week Partial Session (*circle weeks below*) \$325.00
- [] 3 Week Partial Session (*circle weeks below*) \$300.00

Additional Child

- [] 5 Week Full Session *Additional Child Rate* \$320.00
- [] 4 Week Partial Session *Additional Child Rate* (*circle weeks below*) \$295.00
- [] 3 Week Partial Session *Additional Child Rate* (*circle weeks below*) \$270.00

TOTAL AMOUNT DUE: _____

If you are attending a partial session, please circle the weeks you will be attending the Summer Arts Workshop:

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5
6/27- 6/30	7/5 - 7/8	7/11 - 7/14	7/18 - 7/21	7/25 - 7/28

Refund Policy: Tuition will be refunded at the discretion of the Board for emergency situations only.

Please return this form with your check payable to:

Sparta Summer Arts Workshop

@ Sparta Middle School, 350 Main St., Sparta, NJ 07871