

Art Class Registration

Please use a separate form for each student.
Complete entire registration form and deliver to:

Attleboro Arts Museum
86 Park Street, Attleboro, MA 02703
Full payment must be included to complete registration. Thank you.

PLEASE PRINT

Student's Name: _____

Age (if minor): _____

Parent's Signature (if minor): _____

Address: _____

City: _____

State: _____ Zip: _____

Home Tele: _____

Daytime Tele: _____

email : _____
(for Museum news & calendar updates)

Class Name: _____

Day: _____ Time (start/finish): _____

Tuition: \$ _____ Materials Fee: \$ _____

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I understand that there are **no refunds** once payment is issued to The Attleboro Arts Museum (this includes missed or sick days). There are no exceptions to this policy. I give permission for this student's photo to be used in print/on the web. Unless otherwise indicated by an instructor or staff member, all artwork created during classes must be picked up no later than 14 days after the final class session. The Attleboro Arts Museum will not be responsible for student artwork left at the Museum over 14 days after a class has been completed.

X REQUIRED

Membership Categories

Memberships are valid for 1 year.

Senior (65 & over)	\$25
Student (22 & under)	\$25
Artist (For Working Artists)	\$35
Individual	\$35
Family Household	\$50
(Includes 2 adults and any children in household)	

Total Tuition \$ _____

Total Fees \$ _____

Membership \$ _____

Total Due \$ _____

Please make your check payable to: **Attleboro Arts Museum**

Or pay by: _____ VISA _____ Mastercard _____ AMEX

Card Number _____ Exp. _____

Signature: _____

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