

2010 Summer Art Camp Registration

Please use a separate registration form for each camper and for each week that you are registering for. Complete entire registration form, sign, and deliver to: Attleboro Arts Museum, 86 Park Street, Attleboro, MA 02703

Full payment must be included to complete registration.

PLEASE PRINT

Student's Name: _____ Nickname: _____

Age this Summer: _____ Gender M/F: _____ Grade entering: _____

School Attending: _____

Parent/Legal Guardian's Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Home Tele: _____

Daytime Tele: _____

email : _____
(for Museum news & calendar updates)

Emergency Contact Tele: _____

Emerg. Contact relationship to camper: _____

Does camper have allergies? Please list:

How did you hear about our summer art camps?

Camp Week #: _____

Name of Camp(s): _____

Full-day (9-3pm): _____ OR Half-day (9-12:30pm): _____
Full-day campers must bring a lunch, drink and snack. We will re-
frigerate all lunches and drinks.

Tuition: \$ _____ Materials Fee: \$ _____

All campers must be picked up promptly at 12:30/3pm to avoid late fees. Late fees are \$15 per quarter hour.

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. There is a minimum enrollment of 7 students per age group for sessions to run. In an effort to run all of our summer camps, age groups may merge if there is low enrollment. If a camp or class has met the minimum enrollment to run and still has space available, you can register right up until the class starts. However, the class will be canceled if less than 7 students have registered by three days prior to the start date. 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.

I have read this registration form completely and agree to all terms and conditions.

X SIGNATURE REQUIRED _____

Payment (Consider becoming a member to receive tuition discounts):

Membership Categories	
<i>Memberships are valid for 1 year.</i>	
Senior (65 & over)	\$25
Student (22 & under)	\$25
Artist (For Working Artists)	\$35
Individual	\$35
Family Household (Includes 2 adults and any children in household)	\$50

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: _____

We look forward to having your artistic camper join us this summer. Thank you for your support of the Attleboro Arts Museum!