



Class Registration Form

Arts For All, Inc. P.
O. Box 31578
Omaha, NE 68131
402.556.7821

Guardian Name _____

Family Address _____ City _____ State _____ Zip _____

Main Phone _____ Alternate Phone _____

Email _____

Alternate/Emergency Contact _____ Phone _____

Student Name _____ Age _____

Allergies/Medical Notes _____

Class Information:

Location _____ Class _____ Time _____

Location _____ Class _____ Time _____

Student Name _____ Age _____

Allergies/Medical Notes _____

Class Information:

Location _____ Class _____ Time _____

Location _____ Class _____ Time _____

Student Name _____ Age _____

Allergies/Medical Notes _____

Class Information:

Location _____ Class _____ Time _____

Location _____ Class _____ Time _____

Student Name _____ Age _____

Allergies/Medical Notes _____

Class Information:

Location _____ Class _____ Time _____

Location _____ Class _____ Time _____

Office: _____ Pay: Check Cash on Site Square Paypal Date: _____

Payment Plan: _____

Financial Assistance: _____

STUDENT WAIVER:

I, _____, parent or guardian of the above-registered student of Arts For All, Inc., or as the student myself, hereby give approval for students' participation in any and all Arts For All activities during the current session. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and hereby waive, release, absolve, indemnify and agree to hold harmless Arts For All (and its organizers, community partners, sponsors, supervisors, instructors/staff) from any claims arising out of any injury or damages as a result of program participation. I also grant permission to the Arts For All personnel to authorize and obtain emergency medical care from any licensed physician, hospital or medical clinic should the student become ill or injured while participating in Arts For All programs.

I also understand that the class rate is based on enrollment in the entire semester of classes, and that I am responsible for the tuition regardless of student attendance.

_____ (required signature)

USE OF PHOTOGRAPHY: I hereby grant permission to Arts For All to use photographs and/or video of student in publications, news releases, online, and in other communications related to the mission of Arts For All. Students will not be identified by name in any such images. _____ YES _____NO

_____ Initials

ATTENDANCE

Students must sign-in with the Site Supervisor when they arrive on location. If your child has to miss a class, call Arts For All (402) 556-7821 or let your instructor know. When registering, we expect students to enroll in and attend the entire semester. AFA and its instructors strive to provide classes of the highest quality.

The process of learning a new skill requires dedication and perseverance; therefore, attendance to all AFA classes within a semester is not only highly encouraged but essential before a student can reach his or her potential. Acquiring artistic/expressive abilities is a fun, rewarding journey. I understand that regardless of attendance, students/parent/guardian of students are financially responsible for the entire semester. this is not a drop-in course.

_____ Initials

BAD WEATHER POLICY

Please check TV stations (primarily Channel 5 or 9) for cancellation announcements. You may also call AFA at (402) 556-7821 to hear updated class cancellation information. If area schools are closed, AFA will be closed. When in doubt, use your best judgment. If a tornado warning is issued during class, students use the site's tornado shelter. Please be sure we always have your current phone numbers and email address.

_____ Initials