

Art of Summer 2010 Registration

Student Name: _____ Preferred Name: _____

Mailing Address: _____ City: _____ State: _____

Zip: _____ - _____ Phone: _____ Cell/Message: _____

Student E-mail: _____

YOUTH STUDENTS: Birthdate: _____ Current or most recently completed school grade: _____

Parent(s): _____

Parent Ph(s): _____ Parent email: _____

School: _____ Teacher: _____ Ph# _____

***If you are a new student** how did you hear about us? _____

_____ **Junior Immersion:** June 7-25; \$225

_____ **Junior Blitz:** July 19-23; \$90

_____ **Teen June Immersion:** June 4-July 1; \$475

_____ **Teen Blitz:** June 1-10; \$250

Teen Wkly Intensives: \$175/week; \$300/any 2 weeks; \$375/3 weeks.

_____ Week 1 (July 6-10, Tues-Sat): Painting

_____ Week 2 (July 12-16, M-F): The Figure: Clay Modeling and Portraiture

_____ Week 3 (July 19-23, M-F): Black & White: Relief Printmaking/3D Sculpture.

_____ **Independent Projects Class:** June 1-July 30; \$350

Payment Type: Cash TDS Credit Gift Certificate or Check # _____ (payable to The Drawing Studio)

Credit Card (*indicate card type*): M/C VISA Disc AMEX

Card # _____ Exp date: _____ / _____

Card Holder Name (*as printed on card*): _____

Credit Card billing address (*if different from above*): _____

Payment in full is expected with registration unless other arrangements have been made with TDS office. Early registration is advisable; class space is limited and classes with low enrollment may be cancelled.

Refund Policy:

Class cancellation or student withdrawal more than 2 weeks before class start = eligible for a full refund (by check) or TDS credit.

Student withdrawal 2 weeks to 24 hours prior to start date may request a 50% refund or a full TDS credit, valid for 1 year.

No refund or credit after class begins.

Total Due: \$ _____

Notes: