

# Registration Form

## GB Gallery | Studio of Art

### PARTICIPANT

Name	Age if under 12
Address	
Email	Phone #
Emergency Contact Name	Phone #

### ✓ APPROPRIATE PROGRAM

### SPECIFY DATE/S

<input type="checkbox"/> Saturday Morning Art Classes	
<input type="checkbox"/> Figure Drawing and Painting Classes	
<input type="checkbox"/> PD Day Camp	
<input type="checkbox"/> March Break Camp	
<input type="checkbox"/> Summer Camp	
<input type="checkbox"/> 'Twas the Art before Christmas	
<input type="checkbox"/> Art Party for Groups	

### PAYMENT AMOUNT (subject to HST) = \$

- Cheque payable to GB Gallery
- e-Transfer to gbfad9@gmail.com
- Cash to Gail Barber of GB Gallery

### FOR PARTICIPANTS UNDER 12 YEARS OF AGE

Parent / Guardian Name	Phone #
Parent / Guardian Name	Phone #
Signature	Date

Please outline anything you think would be helpful for your child while enrolled in art classes.

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### PLEASE NOTE:

Any special instructions or concerns must be discussed with camp director, Gail Barber, before or during registration, ahead of class time. Thank you.