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 www.ArtBoxAtelier.com

FALL 2021 Once a Week with ArtBox - Registration Form

Please enroll my child in the following:

Class time 3.00 pm - 4.30 pm	SEPTEMBER	OCTOBER	NOVEMBER	FREE School Pick-up	Extended Hours - per session +\$100	Total number of classes per session=fee
MONDAY <input type="checkbox"/> Let's Play Theater	13, 20, 27	4, *11, 18, 25	1, 8, 15, 22, 29	Yes / No	Yes / No	11 = \$385
TUESDAY <input type="checkbox"/> Follow the Artist	14, 21, 28	5, 12, 19, 26	2, 9, 16, 23, 30	Yes / No	Yes / No	12 = \$420
WEDNESDAY <input type="checkbox"/> Animals in Art	15, 22, 29	6, 13, 20, 27	3, 10, 17, 24	Yes / No	Yes / No	11 = \$385
THURSDAY <input type="checkbox"/> Culinary Art	16, 23, 30	7, 14, 21, 28	4, 11, 18, *25	Yes / No	Yes / No	10 = \$350

* October 11th -CLOSED Columbus Day

* November 25th - CLOSED Thanksgiving Day

TOTAL PAID:

CHILD'S First Name:	CHILD'S Last Name:
Age/Grade/School	CHILD'S Birth Day:
YOUR First&Last Name:	ADDRESS:
PARENT'S Phone Number:	E-mail:
IF APPLICABLE, my child's special needs are...(Please explain).	

Conditions:

1. All classes shall be paid in full and in advance (see ArtBox Policies). \$350 once a week tuition is based on 10 classes per session. Fee should be paid by cash, check payable to ArtBox Atelier Brooklyn or send via Venmo to ArtBox Atelier Brooklyn
2. Classes are open as listed above. Please mark days in & off accordingly.
3. No make-up classes at this time.
4. Class starts at 3pm-4.30pm. Extended time available until 5:15pm. Additional fee applies. Free school pick-up.
5. Sibling discount or multiple days discount \$20. (discounts cannot be combined)

* By signing below, I certify that I am the child's Parent/Legal Guardian and that unless otherwise noted in detail on this form, my child is physically, emotionally, and socially able to participate in any ArtBox Atelier Brooklyn activities in this program. I have carefully read ALL of the policies and procedures of ArtBox Atelier Brooklyn (found on web site under POLICIES) and fully understand its contents.

Parent/Guardian Signature

Date



Liability Release Form

Thank you for choosing to visit *ArtBox*!

We strive to create a space that is fun, inclusive, and safe for all who attend.
Please read the following carefully to ensure the best experience for everyone.

Release of Liability

I hereby, voluntarily and of sound mind, **waive, release, and hold harmless** ArtBox, its owners, employees, and agents from any and all claims, demands, lawsuits, expenses, and liabilities, of any and every nature, that I and/or my minor child ever had or may have, or which may occur as a result of my own and/or my minor child's participation in ArtBox activities or events.

I fully understand that ArtBox activities and events have the potential to be or to become dangerous, strenuous, and/or of a physical nature, and that my and/or my child's participation in said activities may result in injury and property damage.

With full knowledge of such risk, I hereby assume full responsibility for any and all risks of injury and property damage and release, waive, and hold harmless ArtBox, its owners, employees, and agents, from any and all claims, demands, lawsuits, expenses, and liabilities for personal injury and property damage which I and/or my minor children may sustain or which may occur as a result of my own and/or my minor children's participation in ArtBox activities, except in the case of gross negligence or intentional misconduct.

I agree to compensate for any damages or losses ArtBox may incur if any litigation arises due to any and all claims made by myself, mychild, or anyone making a claim on my child's behalf.

I am aware that ArtBox activities are not child care as defined by the State of New York. I further understand that ArtBox is therefore notresponsible for unattended children before or after the activities and/or events for which they are enrolled.

Medical Release

In the event I and/or my child requires medical attention or treatment while participating in ArtBox activities or events, or on the premises of the ArtBox studio, ArtBox owners, employees, or agents may authorize treatment including but not limited to first aid and/or calling an ambulance.

I assume full responsibility for any and all medical, hospital, or other expenses I and/or my child may incur as a result of such treatment.

Photography/Video Release

I consent to have, and hereby waive any objection to, ArtBox photographing and/or videotaping me and/or my child and their work when I and/or my child is participating in ArtBox activities or events.

I am aware that all photographs and video footage will remain the property of ArtBox, and that ArtBox may use such photographs and videotapes on the ArtBox website, social media, and/or other promotional material or media. (ArtBox will always ask to take pictures before taking and posting them.)

Your Information

By filling out the information below, I certify that I am the child's PARENT/LEGAL GUARDIAN and that unless otherwise noted in detail on this form, my child is physically, emotionally, and socially able to participate in any ArtBox activities and/or events. I have carefully read ALL of the policies and procedures of ArtBox (found on this Liability Release Form and on ArtBox web site under Policies) andfully understand all of its contents.

By signing box below, I certify that I am the child's PARENT/LEGAL GUARDIAN and have read, understood, and agree to **ALL** of the policies and procedures of ArtBox Atelier Brooklyn. I hereby acknowledge that this is a release of liability and a legally binding contract between myself and ArtBox, and that I sign it of my own free will by checking the box below.

Signature

Date