

# South Lake Art League, Inc.

## Policy for Kids or Teens Class/Workshop Registrations

You must register and pay in advance for the class/workshop. If class/workshop is full, a waiting list will be established. Should your check be returned for insufficient funds, parent/guardian agrees to pay for all fees associated with the collection of due funds.

In the event that a class/workshop is cancelled due to low enrollment, you will be notified and will be issued a full refund. If parent/guardian cancels 24 hours prior to the class, you will receive a refund less a 20% processing fee or you can apply the money to another class/workshop. No refunds will be given once the class/workshop begins.

Last minute registration may be available if you have not pre-registered and space is available. Call to find out if there is space for you in the class/workshop.

### Hold Harmless Agreement (must be read and filled out if 18 or under)

I agree, for myself, my heirs, executors and administrators to not sue and to release and hold harmless South Lake Art League, Inc. and their instructors and volunteers from any and all liability, claims, demands and causes of action whatsoever including without limitation fatality, bodily injury and property damage arising from my child's participation in the South Lake Art League's classes/workshops-whether it results from negligence or any other cause.

In the event that my child becomes ill or injured, I authorize South Lake Art League, Inc. to obtain medical attention for my child at a physician's office or hospital. I understand that every effort will be made to reach me before South Lake Art League, Inc. gives medical permission to treat my child.

I am giving my child permission to participate in all of the activities of the South Lake Art League's Classes/Workshops. I have listed below any special considerations, restrictions, allergies, etc.

Child's Name: \_\_\_\_\_

Restrictions/Allergies, etc. \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_