

Small Hands Art Studio Enrollment



2667 Xanthia Ct. ★ Denver, CO ★ 80238 ★ 303-349-0961★ www.smallhandsart.com

Winter 2011 ENROLLMENT FORM

Child's Name: _____ Birth Date & Age: _____
 Child's Name: _____ Birth Date & Age: _____
 Parent/Guardian Name: _____ Email: _____
 Home Address: _____
 Phone: _____ Emergency Phone: _____

Requested Class Name: _____ **Day/Time/Date(s):** _____/_____/_____

Pick-Up or Drop-Off Service at Westerly Creek Elementary

Please notify your child's teacher that Small Hands Art will pick-up or drop-off.

Pick-Up 11:40am, 3:45pm or Drop-Off 1:00pm (Circle One)

Child's Teacher: _____ Classroom #: _____

Payment Information: Payment Enclosed: yes _____ no _____ Amount: _____

Cash or check only. Checks payable to Small Hands Art.

Submit or mail forms and payment to: Small Hands Art Studio, 2667 Xanthia Ct., Denver, CO 80238.

Class	Day & Time	Winter & Spring Dates	Cost Art Class Only	Cost w/ Pick-up or Drop-off
PARENT TOT				
Smallest Hands (Ages 2-3 years) Continuous Class	Tuesday & Wednesday 9:30-10:15 (NEW TIME)	Tues. 12/7/10, 1/25, 2/1, 3/1, 3/8 Wed. 1/19, 1/26, 2/2, 2/9, 2/16, 3/2, 3/9, 3/16, 4/13, 4/20, 4/27, 5/4	\$10/class \$45 for 5 classes	NA
PRE-K				
Artful Process Session 1 (Ages 3-5, must be potty trained) 8 Classes Minimum/Maximum: 3/8	Thursday 11:50am-12:55pm (WCE Pick-Up 11:40am, Drop-off 1:00pm)	1/20-3/24/11 NO CLASS 2/10, 2/24	\$104	\$122
Artful Process Session 2 - 6 Classes Minimum/Maximum: 3/8	Thursday 11:50am-12:55pm (WCE Pick-Up 11:40am, Drop-off 1:00pm)	4/14-5/19/11	\$79	\$91
K TO 1st GRADE				
Crafty Art/Painting/Drawing (Ages 5-7) - 15 Classes Min/Max: 6/ 8	Wednesday 4:00pm to 5:00pm (WCE Pick-up 3:45pm)	1/12-4/27/11 No Class 3/30	\$198	\$228
2nd TO 4th GRADE				
Everyday Art/Mixed Media Session 1 (Ages 7-10) - 12 Classes Min/Max: 6/10	Tuesday 4:00pm to 5:00pm (WCE Pick-up 3:45pm)	1/11-4/12/11 No Class 2/22, 3/29	\$160	\$184
Painting/Drawing/Paper Art Session 2 (Ages 7-10) - 5 Classes Min/Max: 6/10	Tuesday 4:00pm to 5:00pm (WCE Pick-up 3:45pm)	4/26-5/24/11	\$66	\$76
Special Art Events				
Friday Crafternoons (Ages 6-9) Once a Month Min/Max: 6/10	Friday 1:15pm -3:15pm	12/3/10, 1/14/11, 2/18/11, 3/11/11, 4/15/11	\$24/per class	NA

Small Hands Art Studio
Child Participation Waiver, Release of Liability
& Agreement to Indemnify

Safety Statement

The goal of Small Hands Art Studio is to provide a place to enhance and embrace children’s creative energies. We know that each child who participates in our programs is unique, special, and precious. With this in mind safety is one of our primary concerns. Although classes will not involve materials or tools (i.e. scissors, paper, pencils) that the children would not encounter during the normal course of their lives (i.e. their own home, school, etc.) there is some risk in their use. During the *Crafternoon* sessions there may be use of hot glue guns. Part of our program is to teach children the proper use, storage, and safety elements associated with each of the items they use in our classes. Please know that at Small Hand Art Studio safety is as important as creativity.

Waiver, Release of Liability & Agreement to Indemnify

In consideration for Small Hands Art Studio (SHAS) allowing _____ (“Child/ren”) transport to or from the property and/or use of SHAS equipment and facilities (collectively referred to hereinafter as the “Facilities”) and to participate in art classes or other activities hosted by SHAS. I as the parent/legal guardian of Child/ren, do hereby agree to the following conditions:

I understand and acknowledge there are certain inherent risks in participating in classes and activities hosted by SHAS. SHAS shall not be held liable for any damage to personal items such as (but not limited to) clothing, shoes, or other personal property caused by materials used during class or activities at SHAS.

I am aware that the products used at the Facility may be considered allergens or irritants to certain people, including, but not limited to: latex, acrylic paints, dust particles and nuts or other food allergens may be present in the SHAS facility. It is the parent/guardian’s responsibility to inform SHAS of a child’s allergies in written form. SHAS shall not be held liable for any allergic reactions or injuries caused by a parent/guardian’s failure to inform SHAS of allergies or other medical conditions.

I hereby unconditionally waive, indemnify and hold harmless any right I might otherwise have to recover damages or other relief from SHAS and the employees/representatives of the Facilities as a result of any personal injury or property that I, my Child(ren), or any third party that I bring, or invite to SHAS may suffer during the art classes or other activities hosted by SHAS, including, without limitation, injury or damage arising out of acts or omissions constituting negligence or gross negligence or facts or conditions that would give rise to premises liability. I further agree to not bring any suit based in whole or in part on any claim covered by this waiver.

Further, I hereby RELEASE, agree to defend, indemnify and hold harmless, Small Hands Art Studio, employees and agents (collectively “Releasees”) from any claims, losses or expenses incurred on behalf of me, my child/ren, my child’s/ren’s family. The participant/participant’s family assumes all risk associated with participation in the SHAS classes and/or activities.

Printed Name

Date

Signature

Relationship to Child/ren

PLEASE PROVIDE EMERGENCY CONTACT INFORMATION BELOW:

CONTACT NAME: _____ Phone: _____ Cell: _____

CONTACT NAME: _____ Phone: _____ Cell: _____

Doctor’s Name: _____ Phone: _____

Please list the Child’s allergies or other medical conditions below or if none, please print N/A:

THIS FORM MUST BE COMPLETED AND RETURNED BY THE FIRST DAY OF CLASS
