



artsbenicia
after school

ABAS Registration

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Joe Henderson Multi-purpose Room
Grades 3 - 5 **Time: 3:00 - 4:00 pm**

___ **October 4, 11 and 18**
 ___ **October 25, November 1 and 8**
 ___ **November 29, December 6 and 13**

ABAS offers elementary school students a chance to explore the arts and develop new interests in a fun, supportive environment that encourages creativity and provides opportunities to practice public speaking and problem-solving skills taught by an experienced artist.

Please fill out 1 form per child

Student's Name: _____ Grade: _____ Teacher: _____

Parent's Name: _____

Address: _____

City/State/Zip: _____ Home Phone: _____

E-mail: _____ Cell Phone: _____

Emergency Contact Name: _____

Phone: _____ Relationship to child: _____

Do you have a Family Membership with Arts Benicia? Yes No I will join now!

Return form: with payment to the mail cubby labeled "Arts Benicia" in the Joe Henderson front office or mail to Arts Benicia.

Contact Us: If registering less than two days before class.

Coordinator:
Jeremy Throne
707-747-0131
jeremy@artsbenicia.org

3 Weeks : *AB Member* **\$30**
Non-Member **\$35** \$ _____

Arts Benicia Family Membership (Optional)
add \$60 for 1 year \$ _____

Total \$ _____

Make checks payable to **Arts Benicia**

My child has the following allergies/health concerns:

Class ends at 4:00 pm. Please arrange to pick up your child promptly. Late fees will apply: \$10 for each ten minutes past 4:10 pm.

My child will be picked up by a parent or guardian at the end of class.

My child has permission to be picked up at the end of class by _____

My child has permission to walk home at the end of class.

Parent's Signature: _____ **Date:** _____

Photo Release:

Arts Benicia has permission to photograph/videotape my child/children during activities at *Arts Benicia After School*.

Arts Benicia may use photos/video in any and all promotional and advertising media including, but not limited to: education materials, publications, advertising, Arts Benicia's web site and Facebook page.

Parent's Signature: _____ **Date:** _____

My child is voluntarily participating in Arts Benicia After School. I understand that Benicia Unified School District approves of this program, but does not accept any responsibility to this program. Further, I understand the Joe Henderson Elementary PTG is not responsible for participating vendors or instructors of programs offered.

Parent's Signature: _____ **Date:** _____

How did you hear out about Arts Benicia After School? **Flyer** **Friend** **Facebook**

AB Email **Previously Enrolled** **Other** _____