

Elementary Art Class Registration Form



Child's First Name: _____

Child's Last Name: _____

Parent/Guardian Full Name: _____

Phone Number: _____

Email Address: _____

Classes are \$22.00 each, and are held 3:00 PM - 3:45 PM on the dates listed below.

<input checked="" type="checkbox"/>	Please indicate which date(s) you wish to participate in		
<input type="checkbox"/>	September 5	<input type="checkbox"/>	October 24
<input type="checkbox"/>	September 12	<input type="checkbox"/>	November 14
<input type="checkbox"/>	September 19	<input type="checkbox"/>	November 21
<input type="checkbox"/>	September 26	<input type="checkbox"/>	December 5
<input type="checkbox"/>	October 3	<input type="checkbox"/>	December 12
<input type="checkbox"/>	October 10	<input type="checkbox"/>	December 19
<input type="checkbox"/>	October 17	<input type="checkbox"/>	

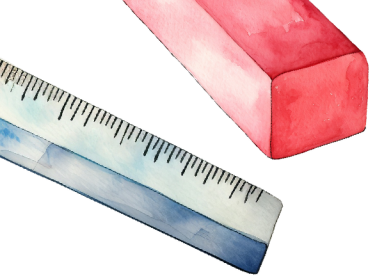


Contact Lisa Roberts at 352- 601-0438 for further information.

Fees payable upfront, please make checks out to Lisa Roberts

If you would be interested in adding coding and engineering to the mix in January please check here ☐





Preschool 4/5-Intermediate Art Class Registration Form



Child's First Name: _____

Child's Last Name: _____

Parent/Guardian Full Name: _____

Phone Number: _____

Email Address: _____

Classes are \$22.00 each, and are held 2:15 PM - 3:00 PM on the dates listed below.

<input checked="" type="checkbox"/>	Please indicate which date(s) you wish to participate in		
<input type="checkbox"/>	September 5	<input type="checkbox"/>	October 24
<input type="checkbox"/>	September 12	<input type="checkbox"/>	November 14
<input type="checkbox"/>	September 19	<input type="checkbox"/>	November 21
<input type="checkbox"/>	September 26	<input type="checkbox"/>	December 5
<input type="checkbox"/>	October 3	<input type="checkbox"/>	December 12
<input type="checkbox"/>	October 10	<input type="checkbox"/>	December 19
<input type="checkbox"/>	October 17	<input type="checkbox"/>	



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