

Registration Form — Summer 2015



Classes are filled on a first-come, first-served basis, so—**Register Today!** It's as easy as 1, 2, 3:

1. Complete the registration form below — **Note:** By completing this form you agree to the terms & policies on the following page / reverse.
2. Supply payment information.
3. Mail or deliver form & payment to CREATIVE ARTS, 25 Woburn Street, Reading MA 01867, or email to info@WeTeachCreativeArts.org

Call CREATIVE ARTS at **781.942.9600** with any questions or suggestions!

Parent/Guardian's Name(s) _____

Address _____ City _____ Zip _____

Primary Phone # _____ Secondary Phone # _____ Email _____

Parent #1 Place of Employment & Phone _____ Parent #2 Place of Employment & Phone _____

1st Student's First & Last Name _____ **DOB** _____ **Male/Female** _____

Class/Workshop/Instrument	Instructor	Week # or Dates	Tuition
Class/Workshop/Instrument	Instructor	Week # or Dates	Tuition
Class/Workshop/Instrument	Instructor	Week # or Dates	Tuition
Class/Workshop/Instrument	Instructor	Week # or Dates	Tuition

2nd Student's First & Last Name _____ **DOB** _____ **Male/Female** _____

Subtotal Tuition: _____

Less Possible Discounts/Coupons: _____

TOTAL TUITION DUE: _____

Please Add My Tax-deductible Donation: _____

Possible Credit Card Fee: _____

Possible Payment Plan Fee: _____

Total Due: _____

Amount Paid Today: _____

Please remember to include forms & post-dated checks for remaining balance due!

PAYMENT INFORMATION:

Cash (Emp. Initials _____) - or - Check # _____ Payable to Creative Arts

Visa, MasterCard & Amex also accepted for a FEE per transaction:
(Credit Card FEES: \$5 if <\$100; \$10 if <\$500; \$20 if <\$1,500; \$30 if >\$1,500)

Card #: _____ / _____ / _____ / _____

Billing Zip Code _____ CVC Code _____ Exp. Date ____ / ____

AMOUNT PAID: (Check One & Complete reverse side/page 2)

____ Paid in full—The BEST deal for both of us!

____ 50% Non-refundable Deposit (see policies), post-dated chk # _____

____ Payment Plan (see policies) with post-dated checks below:

_____, # _____, # _____, # _____

How did you hear about us?

____ Returning Student ____ Friend ____ Internet ____ Library

____ School ____ Picked Up Flyer Other _____

OFFICE USE ONLY

DATE STAMP

Paid/Ver: _____

Attend: _____ Tally: _____

CCDB: _____

MDB: _____

Payment Options & Methods — Summer 2015

Payment Options & Methods

1. **Pay in full.** The BEST deal for CREATIVE ARTS & for you!!
2. **Non-refundable Deposit.** A non-refundable deposit of 50% of total summer tuition plus fees are due with the registration form. Tuition balance must be made by a post-dated check or by submitting credit card information—to be processed June 1st.
3. **Payment Plan.** A non-refundable payment plan fee of \$18 is due with the 1st installment along with the registration form. Payment schedules of equal installments (maximum of 4 installments) must be made by post-dated checks with final payment due at least three weeks PRIOR to the start of the first class/workshop/lesson.

Payment Methods. CREATIVE ARTS accepts cash, check and credit cards. Any payment returned by the bank will be charged **\$35**. If using a credit card, processing fees will be added each time your credit card is charged. **Credit Card Fees** are based on the amount being charged at the time of the transaction: \$5 for amounts of \$100 or less, \$10 for amounts of \$500 or less, \$20 for amounts of \$1500 or less, \$30 for amounts greater than \$1500.

CREATIVE ARTS reserves the right to suspend classes or lessons for any student whose tuition payments are in arrears, unless other arrangements have been made with the office.

Summer Withdrawal Policy

Tuition is non-refundable unless a withdrawal request is made in writing to Executive Director Jennifer Hart and received by June 1, 2015. If option 2 is selected, then the first 50% is non-refundable even if a request is made prior to June 1st. A \$35 processing fee will be assessed to all approved withdrawal refunds. Withdrawal requests made after June 1st will be reviewed on a case-by-case basis.

Wait List Policy

When programs reach capacity, we begin a first-come, first-served wait list. If a spot becomes available, we contact the family immediately. A finite reply time is given and, if we do not receive a reply, we move on to the next person on the list. Registration forms are required, but payment is only processed if the spot is filled.

Summer Full-Week Program Policies

For the safety of your children, CREATIVE ARTS follows state & town summer camp regulations. All students are required to submit current immunization records, physical exam & CREATIVE ARTS Emergency Contact Forms. **All forms are due TWO WEEKS BEFORE the first day of the full-week program.** Failure to submit forms will void registration. No refunds are given for voided registrations. It is the parent's responsibility to submit all required information.

If choosing option 2 or 3 above, **this form and your post-dated checks or credit card information is REQUIRED** with registration in order to secure your slot. By completing this form you agree to the above mentioned policies and statements.

I, _____, have read the above terms and agree to them. I also authorize Creative Arts for Kids, Inc. to make the following transactions:

___ **Option 2, Non-refundable Deposit:** Automatically deposit my checks or charge my credit card on the following dates:

Date: _____ Amount: \$ _____ Check #: _____ Date: _____ Amount: \$ _____ Check #: _____

Or credit card (fees apply): _____ / _____ / _____ / _____ exp: ____ / ____ CVC: _____ Zip Code: _____

___ **Option 3, Payment Plan:** Automatically deposit my checks or charge my credit card on the following dates:

Date: _____ Amount: \$ _____ Check #: _____ Date: _____ Amount: \$ _____ Check #: _____

Date: _____ Amount: \$ _____ Check #: _____ Date: _____ Amount: \$ _____ Check #: _____

Or credit card (fees apply): _____ / _____ / _____ / _____ exp: ____ / ____ CVC: _____ Zip Code: _____

NOTE: By providing credit card information you agree to the additional credit card fees per transaction as indicated above.

Student(s) Name (Please Print): _____

Parent Signature: _____ Date: _____

CA Staff Signature: _____ Date: _____