

ARTLAB Registration Form

2417 WATERS AVE SAVANNAH, GA 31404 912-388-1939



Child's name: _____ Age: _____

Child's name: _____ Age: _____

Child's Name: _____ Age: _____

Parent/ Guardian's name: _____

Phone Number: _____

Parent/ Guardian's name: _____

Phone Number: _____

Email: _____

Address: _____

Emergency contact: _____

In the event you will not be the one picking up your child from ArtLab please list anyone you authorize us to release your child to at pickup:

Drop Off/ Pick Up:

• Would you like to do the curb side Drop off/ Pick up?
(Pull up to door and we will help your child get to and from the studio so you don't have to park)
Circle one: Yes No

Special Instructions:

- Please pack a water bottle
- There is always a risk of getting your clothes messy or permanently stained. Please dress for mess.
- Please inform us of any medical conditions we need to be aware of

Please read the following carefully:

I certify that the information I provided above is accurate. I give consent for my child to participate in all camp activities. I have reviewed all the ArtLab Studio Rules, Expectations, and Consequences with my student. I will not hold ArtLab responsible for any accident or injury that may result during camp activities, and if notified of injury or illness I will make immediate arrangements to pick up my child.

By submitting this form, I have read and hereby agree and consent to this Liability Waiver and Emergency Medical Authorization. In the event that your child requires emergency medical treatment, it is necessary for us to have your permission for treatment. Furthermore, we will not be financially responsible for any injury that occurs before, during or after the class. The information provided on this form will remain confidential and will not be disclosed without your consent except to emergency medical personnel. In the event that my child becomes ill or injured, I authorize emergency treatment (911) to be obtained by representative of ArtLab.

Parent Signature: _____

Date: _____