

# CAMP / WORKSHOP REGISTRATION



4132 E. Grand River  
Howell, MI 48843  
517-548-5386  
www.TheCeramicStudioEtc.com

parent / guardian name - first and last

e-mail

address

city, state, zip

home phone

mobile phone

emergency contact name / relationship

emergency phone

•All classes must be paid for at least one week in advance of scheduled meeting time. If the unfortunate situation occurs that we must cancel any class date you have signed up for, a full refund will be issued.  
Class fee is non-refundable within 10 days of scheduled meeting time.

•In the rare instance a piece is irreparably damaged during the firing process, a store credit will be issued.

•For the glass workshops, safety glasses will be provided.

Note that glass can be sharp and caution must be used while handling or cutting.

•In some classes we take photographs that are used on our website or advertising. If you grant permission to us to photograph you/your child without payment or compensation and allow us the rights to use, reproduce and disseminate any photograph or likeness taken in conjunction with the classes, please initial below.

*I have read, understand and agree to the terms and conditions outlined and hereby grant permission for my child/myself to participate in The Ceramic Studio Etc... camp/workshop/classes.*

parent / guardian signature

date

photo release - initials

student name - first and last

age

allergy info

student name - first and last

age

allergy info

student name - first and last

age

allergy info

Student (first name)	Class Title	Date	Amount
			\$
			\$
			\$
			\$
			\$
			\$
total due:			\$

\_\_\_\_\_ I have enclosed a check payable to **The Ceramic Studio Etc...**

\_\_\_\_\_ I prefer to pay with my Visa / MC. Please charge my card the "Total Due" (or phone in the card info)

Card # \_\_\_\_\_

Billing address ZIP \_\_\_\_\_

Name on card \_\_\_\_\_

Exp. date \_\_\_\_\_

CV code \_\_\_\_\_