



# VERMEER ACADEMY REGISTRATION FORM

Today's date \_\_\_\_\_

Name \_\_\_\_\_  Male  Female

Street \_\_\_\_\_

City \_\_\_\_\_ Zip code \_\_\_\_\_

Email \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

(If under 18, parents signature is required. See second page)

Occupation / Year in school \_\_\_\_\_

Registration for  Workshop  Class

(\$100 deposit required for workshop or class. For a one day workshop, please remit the entire fee.)

Please make checks payable to The Vermeer Academy.

Name of the class/workshop you are registering for: \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_ Course # \_\_\_\_\_

Location \_\_\_\_\_

(unless indicated, classes take place at 1313 Boland Pl., Richmond Heights, MO).

Cost

Down payment\* \$ \_\_\_\_\_ Check number \_\_\_\_\_ Received \_\_\_\_\_

Final payment\* \$ \_\_\_\_\_ Check number \_\_\_\_\_ Received \_\_\_\_\_

(Your payment must be made in full before you can begin the class).

How did you hear about the class/workshop?

\_\_\_\_\_

What is the purpose for you signing up for the class/workshop?

\_\_\_\_\_

What has been your previous artistic experience? (courses you've taken, workshops, awards, etc.?)

\_\_\_\_\_

Additional information we should know that would help make this a positive experience for you:

\_\_\_\_\_

**Please mail this form, along with your check to The Vermeer Academy.**

\* **Cancellation Policy:** Your deposit is non-refundable except if we cancel the class. Your final payment for the class must be paid 30 days prior to the start of the class or workshop except for those signing up at the last minute in which case the entire tuition is due upon registration. If you pay the entire tuition when you register and decide to cancel, all will be refunded if you do so 30 days prior to the start of the class/workshop. After 30 days, you be refunded all minus your deposit.



# VERMEER ACADEMY

## REGISTRATION FORM

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If under 18, a parent's signature is required.

I, \_\_\_\_\_  
name of parent or guardian

allow my son/daughter, \_\_\_\_\_  
name of student

to attend a workshop/class at the Vermeer Academy on \_\_\_\_\_ and, do not hold the  
dates

academy nor the facility liable for accidents on or near the premises

\_\_\_\_\_, \_\_\_\_\_  
signature date

**Please mail this form, along with your check to The Vermeer Academy.**