

*Payment is required upon registration.

*Student must be registered by 12:00pm the day prior to class.

*Classes with less than 2 students are subject to cancellation.

2022 FALL CLASS REGISTRATION

Student Name _____

(if under 18) Age _____ Parent Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email: _____

Emergency Contact Name _____ Relationship _____

Phone Number: _____

YES NO I permit photographs of me and/or my child(ren) to be used
in Emporia Arts Center promotional materials.

1. Class Name _____ Fee \$ _____

Time _____ Date _____ Code _____

2. Class Name _____ Fee \$ _____

Time _____ Date _____ Code _____

3. Class Name _____ Fee \$ _____

Time _____ Date _____ Code _____



Payment Initials: _____ Spreadsheet Initials: _____

Student Name _____

4. Class Name _____ **Fee \$** _____

Time _____ Date _____ Code _____

5. Class Name _____ **Fee \$** _____

Time _____ Date _____ Code _____

6. Class Name _____ **Fee \$** _____

Time _____ Date _____ Code _____

7. Class Name _____ **Fee \$** _____

Time _____ Date _____ Code _____

8. Class Name _____ **Fee \$** _____

Time _____ Date _____ Code _____

9. Class Name _____ **Fee \$** _____

Time _____ Date _____ Code _____

10. Class Name _____ **Fee \$** _____

Time _____ Date _____ Code _____

11. Class Name _____ **Fee \$** _____

Time _____ Date _____ Code _____

TOTAL FEE \$ _____