

BETSY BEACH • ART CLASS REGISTRAION FORM

304 Wilton Road, Wesport, CT 06880 • (203) 454-9831 • betsybeach@optonline.net

DAY \_\_\_\_\_ TIME \_\_\_\_\_

Student's name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Parent's name \_\_\_\_\_ Phone \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_ E-mail \_\_\_\_\_

Emergency contact \_\_\_\_\_ Phone \_\_\_\_\_

Important medical information (allergies, etc.) \_\_\_\_\_