



HOCKADAY MUSEUM OF ART

Winter-Spring 2025 Children's Art Class Registration

Class enrollment is taken on a first come, first served basis with a limit of 16 students per class. Payment and completed registration form must be received by the Hockaday Museum of Art to guarantee a place in class. Full or partial scholarships for those with financial need are available through the Ed Bailey Scholarship fund.
Hockadaymuseum.com/scholarships

Children's class cancellation & refunds:

100% refund, less \$5 administrative fee for cancellation 7 or more days in advance of class.

50% refund, less \$5 administrative fee for cancellation 2-6 days in advance.

No refund for cancellations made less than 2 days in advance.

Classes that do not meet a minimum of 8 registered students will be cancelled and a full refund given.

Student Name		Student Age
Health issues we should be aware of:		
Parent/Guardian		Phone
Mailing Address		
City	State	Zip Code
e-mail		
Emergency Contact (Name & Phone)		
CLASS TITLE & DATES	CLASS FEE	AMOUNT DUE
After School Art ages 7-14 Tuesdays 3:30 drawing warm up; 3:45-4:50 pm art instruction		
<input type="checkbox"/> Sculpture Innovators – Jan 28, Feb 4, 11, 18	\$40	
<input type="checkbox"/> Exploring Color (Pastels)– Feb 25, March 11, 18, April 1	\$40	
<input type="checkbox"/> Inky Fingers (Printmaking) – April 22, 28, May 6, 13	\$40	
Homeschool Art ages 6-14 Wednesdays 10:30 am-12:00 pm		
<input type="checkbox"/> Homeschool Winter Session 1 – Jan 15, 22, 29	\$30	
<input type="checkbox"/> Homeschool Winter Session 2 – Feb 5, 12, 19	\$30	
<input type="checkbox"/> Homeschool Winter Session 3 – Mar 12, 19, April 2	\$30	
<input type="checkbox"/> Homeschool Spring Session 1 – April 16, 23, 30	\$30	
<input type="checkbox"/> Homeschool Spring Session 2 – May 7, 14, 21	\$30	
	SUB TOTAL	
	10% Member Discount	
	Credit	
Payment Method: ____Cash ____Check ____Visa ____MC ____AmEx ____Discover	TOTAL	\$

Photo Release: Unless the box below is checked it is understood that the Hockaday Museum of Art has permission to use any pictures taken in public view of my child individually or any in which my child appears in whole or in part. I understand that these pictures may be reproduced in print or electronic media specifically to promote the Hockaday Museum of Art and any of its programs. ☐ I do not agree to the photo release

Signature _____ **Date** _____

For phone or mailed registrations:

Name as printed on Credit Card: _____

Mailing Address: _____ City _____ State _____ Zip _____

Credit Card # _____ Exp Date: _____ Security Code _____