Classes Fill Quickly!
Pay by credit card online, or use the form below and mail in a check today!

KidzArt at Triadelphia Ridge, Sponsored by the PTA

LEARN to DRAW with KidzArt! **All quality supplies provided.**

TUESDAYS: 3:25-4:25, Grades K-5

FALL 9/20, 9/27, 10/4, 10/11, 10/18, 10/25, 11/1, 11/8 Pay Before 9/14-$120, 9/14 & after-$130
LATE FALL 11/15, 11/29, 12/6, 12/13, 12/20, 1/3, 1/10, 1/17 Snow Date: 1/24 Pay Before 9/13-$120, 9/13 & after-$130
WINTER 1/31, 2/7, 2/14, 2/21, 2/28, 3/6, 3/13, 3/20 Snow Date: 3/27 Pay Before 9/13-$120, 9/13 & after-$130
SPRING 4/10, 4/17, 4/24, 5/1, 5/8, 5/15, 5/22, 5/29, 6/5 Pay Before 9/13-$135, 9/13 & after-$145

KidzArt is a **fun**, unique and confidence-building art experience. Our drawing curriculum is an incredible tool for delivering an ongoing, highly engaging and educationally rich creative experience that amazes and delights students. Consistent participation in our classes calls on your child to **solve problems**, follow through, and think imaginatively. We promote **confidence** in our students' self-expression by emphasizing the process, rather than the result!

*Schools and teachers will assist students in reporting to the designated KidzArt room directly after release. We are unable to go look for a child in after care during class. After class we will escort students to their after care program. Please meet your child in the front hallway promptly after class.

SPRECIAL INSTRUCTIONS

- ***DO NOT*** **return form or payment to your child's school or teacher.**
- **A note must be written to your child's teacher EVERY KidzArt day.**

*******Volunteer Needed*******

Parent Volunteer will receive 70% off tuition and must attend all classes in the session.
First come, first served, pick parent volunteer option when registering. Details on KidzArtMd.com

Register On-line at **www.KidzArtMD.com** **OR** complete form below, include check & mail to:
KidzArt c/o Vicki Harvey, 6412 Summer Sunrise Dr., Columbia, MD 21044, info@kidzartmd.com

First Student's Name:	TRES 2nd Student's Name:
Birthday:	Birthday:
Grade/Homeroom Teacher:	Grade/Homeroom Teacher:
Circle sessions: A B C D	Circle sessions: A B C D
Allergies/medical conditions:	Allergies/medical conditions:

Parent/Guardian:	**Phone** 1:	**Phone** 2:
Address:	City:	Zipcode:
Email:	After class my child will: ☐ be picked up ☐ go to aftercare in bldg.	

In registering, you are waiving any right to claim against KidzArt owners, staff and teachers, or your child's school in the event of an accident or injury. KidzArt does not offer refunds for tuition paid once a session has begun, but will provide a credit towards future KidzArt programs when warranted. It is your responsibility to pick up your child from the designated area at the designated end time unless other arrangements have been made. You hereby authorize the release of your child's artwork and photo for use by KidzArt.

Signature_____Date_____