



Register by phone or mail by filling out one form for each child. Send to the address below.
 More information is available on our website at www.alleywayarts.org
 Or call Jennifer at 612-508-0840

All classes are held at
Alleyway Arts Studio
 2714 ROBBINS STREET MINNEAPOLIS 55410
 612-508-0840

*Alleyway Arts reserves the right to cancel any camp that does not meet minimum enrollment by the registration deadline. The registration deadline is two weeks prior to class. If we cancel, you will receive a full refund.
 **Alleyway Arts withdrawal policy is as follows. Full refund or studio credit is offered to students who withdraw more than two weeks before the first class. After that we offer credit towards future classes or merchandise.

2015 SUMMER CAMP REGISTRATION FORM

STUDENT INFORMATION

NAME _____ AGE _____

ADULT CONTACT INFORMATION

NAME _____ DAY PHONE _____ PHONE _____

NAME _____ DAY PHONE _____ PHONE _____

EMAIL _____ ADDRESS _____

CITY, STATE, ZIP _____

ANY SPECIAL INSTRUCTIONS OR CONCERNS _____

**CHECK BOXES OF CAMPS CHOSEN
 \$65 EACH HALF DAY CAMP**

- | WEEK | AM (age 5 – 10) | PM (Teens) |
|-------------|--------------------------------------|--------------------------------------|
| 1 | <input type="checkbox"/> DRAW/PTG | <input type="checkbox"/> DRAW/PTG |
| 2 | <input type="checkbox"/> MOSAIC | <input type="checkbox"/> MOSAIC |
| 3 | <input type="checkbox"/> BASKETRY | <input type="checkbox"/> BASKETRY |
| 4 | <input type="checkbox"/> CLAY | <input type="checkbox"/> CLAY |
| 5 | <input type="checkbox"/> BATIK | <input type="checkbox"/> BATIK |
| 6 | <input type="checkbox"/> PAPERMAKING | <input type="checkbox"/> PAPERMAKING |
| 7 | <input type="checkbox"/> BEADWORK | <input type="checkbox"/> BEADWORK |
| 8 | <input type="checkbox"/> OPEN ARTS | <input type="checkbox"/> OPEN ARTS |

Visa Master Check (payable to Alleyway Arts)

Card # _____

Exp. _____ Name on card _____

+ Add \$10 each ½ day camp for materials

Registration Total _____

Signature _____