Village Center for the Arts

A Nonprofit Community Fine Art Center

Adult Registration

How did you hear about VCA? _____

Class/ Activity: _____**Today's Date:** _____**Start Date:** _____

Name: _____

Age: (opt)_____

Street Address: _____

Town: _____**State:** _____ **Zip:** _____

Home/Cell Number:_____

Other Number: _____

E-Mail:_____

Please call with any questions. **860-354-4318. Return form to VCA.**

Email:vca@villagecenterarts.com | Web: www.villagecenterarts.org

Make Checks Payable to

VCA

12 Main Street

New Milford, CT 06776

SIGNED:_____ DATE:_____

CANCELLATION POLICY

- If the student is sick, and you inform us **prior** to the class time, the student may extend their session by one week.
- If you **do not** inform us of an impending absence, the day will be counted as part of the 6-week session with no make-up class offered.
- In case of inclement weather please call ahead

I, the undersigned, authorize Village Center for the Arts to record on video tape, photography, voice recording, or interview through print or other media, my child's first name, voice, image, artwork, and or performance for informational programs, reports, and promotional materials to be used for non-commercial purposes. I understand that neither my child nor I will receive compensation for this appearance and no private individual will receive compensation of any kind as a result of broadcasting this material.

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