

3231. Rt.27, Franklin Park, NJ 08823 (732) 940-9401

Enrollment Application

Expected Start Date:			
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Student's Name:			
Male/Female:			
Home Address:			
E-mail Address:			
Home Phone No:	Cell Phone:		
For Children only:			
Mother's Name:	Cell Phone:		
Place of work:			
Father's Name:	Cell Phone		
Date of Birth:			
Child's Grade in School:			
Fees Payable along with the Enrollment Contract		Amount to be paid	
		in \$	
One time registration fee		\$35	
Art supplies fee for one year		\$65	
Fee for the period		\$	
Total Fee to be paid on or b		\$	
absence, and can not be carried over t		·	
additional late fee there after.	e very 1 st week of the month. After 1 st w	eek, there will be \$10 late lee,	and \$5
I understand that, there will be 3% ext	tra charge, if paid by credit card.		
I understand that, no make up class we major holidays.	ill be given, if the class is being cancelle	ed, because of the inclement w	eather or
I understand all the art supplies is incl	uded in the tuition, except acrylic suppli	ies.	
How did you learn about our Studio?			
Signature	Date		