

Studio V

179 Main Street
Vergennes, VT 05491

Class Registration Form

Student's Name _____

Student's Age _____

If Under 18,
Name of Guardian _____

Mailing address _____

City, State, Zip _____

Phone(s) _____

E-mail(s) _____

Name of the class _____

Start date of the
session you would
like to enroll in _____

Cost of the session _____

To register and reserve a spot in an offered class, complete this registration form.

Full tuition is due with this form.

All Cancellation requests received prior to 14 days of the start of the session will be honored with a refund minus the cancellation fee. Tuition may be transferred to another class (as space permits) or refunded at the discretion of the instructors if cancellation is within 14 days of the start of class.

The cancellation fee for a multi week class will be \$25.

The cancellation fee for a workshop will be \$10.

Make checks payable to Studio V.

**Mail to:
Studio V
179 Main Street
Vergennes, VT 05491**

Emergency Contact _____

phone number _____

Please list any allergies _____