

165 Nassau Ave, Brooklyn, NY11222

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2025 Winter Wonderland - Midwinter Break Session - Registration Form

| CHILD'S First Name: | CHILD'S Last Name |): : | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------------|------------|
| Age/Grade/School | CHILD'S Birth Day: | | |
| YOUR First&Last Name: | Address: | | |
| PARENT'S Phone Number: | E-mail: | | |
| IF APPLICABLE, my child's special needs, allergies are (Please | explain). | | |
| | | | |
| Please enroll my child in the following: | Hours | Tuition | |
| Winter Wonderland – February 17th-21st | 8.00am - 5pm | \$565 | |
| Tobladiy Trui 2180 | o.oodiii opiii | \$666 | |
| | | | |
| Winter Wonderland – Day Camp (circle what applies) | 8.00am - 5pm | \$155 / per day | |
| M Tu W Th F | | | |
| Total: | | | |
| \$565 weekly or \$155/per day tuition fee must be paid in ad | lvance. | | |
| Conditions: 1. Registration is completed only upon signed enrollment form and full tuition Venmo transfer to: ArtBox Atelier Brooklyn 2. Sorry, no make-up class available for Winter Wonderland Session. Please POLICIES. 3. 10% sibling discount | | | • |
| Drop off – 8-9am Pick up after 4-5pm Lunch + Snacks There will be 2 Snack Breaks and 1 Lunch Break each day of Winter Break Please make sure to pack enough food for your child and remember to include | e any beverages and/or | water. Please inform us of any food | allergies. |
| We can't distribute any medication to your child except of Epi-Pens. If your ch | ild is allergic please chec | ck here> ALEGY WARNING CHECK HERE | |

Parent/Guardian Name (PRINT)

Date

Parent/Guardian Signature



Thank you for choosing to visit ArtBox!

We strive to create a space that is fun, inclusive, and safe for all who attend. Please read the following carefully to ensure the best experience for everyone.

Release of Liability

I hereby, voluntarily and of sound mind, waive, release, and hold harmless ArtBox, its owners, employees, and agents from any and all claims, demands, lawsuits, expenses, and liabilities, of any and every nature, that I and/or my minor child ever had or may have, or which may occur as a result of my own and/or my minor child's participation in ArtBox activities or events.

I fully understand that ArtBox activities and events have the potential to be or to become dangerous, strenuous, and/or of a physical nature, and that my and/or my child's participation in said activities may result in injury and property damage.

With full knowledge of such risk, I hereby assume full responsibility for any and all risks of injury and property damage and release, waive, and hold harmless ArtBox, its owners, employees, and agents, from any and all claims, demands, lawsuits, expenses, and liabilities for personal injury and property damage which I and/or my minor children may sustain or which may occur as a result of my own and/or my minor children's participation in ArtBox activities, except in the case of gross negligence or intentional misconduct.

I agree to compensate for any damages or losses ArtBox may incur if any litigation arises due to any and all claims made by myself, mychild, or anyone making a claim on my child's behalf.

I am aware that ArtBox activities are not child care as defined by the State of New York. I further understand that ArtBox is therefore notresponsible for unattended children before or after the activities and/or events for which they are enrolled.

Medical Release

In the event I and/or my child requires medical attention or treatment while participating in ArtBox activities or events, or on the premises of the ArtBox studio, ArtBox owners, employees, or agents may authorize treatment including but not limited to first aid and/or calling an ambulance.

I assume full responsibility for any and all medical, hospital, or other expenses I and/or my child may incur as a result of such treatment.

Photography/Video Release

I consent to have, and hereby waive any objection to, ArtBox photographing and/or videotaping me and/or my child and their work when I and/or my child is participating in ArtBox activities or events.

I am aware that all photographs and video footage will remain the property of ArtBox, and that ArtBox may use such photographs and videotapes on the ArtBox website, social media, and/or other promotional material or media. (ArtBox will always ask to take pictures before taking and posting them.)

Your Information

By filling out the information below, I certify that I am the child's PARENT/LEGAL GUARDIAN and that unless otherwise noted in detail on this form, my child is physically, emotionally, and socially able to participate in any ArtBox activities and/or events. I have carefully read ALL of the policies and procedures of ArtBox (found on this Liability Release Form and on ArtBox web site under Policies) andfully understand all of its contents.

By signing box below, I certify that I am the child's PARENT/LEGAL GUARDIAN and have read, understood, and agree to **ALL** of the policies and procedures of ArtBox Atelier Brooklyn. I hereby acknowledge that this is a release of liability and a legally binding contract between myself and ArtBox, and that I sign it of my own free will by checking the box below.

Signature Date