

Tucson Clay Art Center
1703 E. Ft. Lowell Rd. Tucson Arizona 85719 (520) 955-7350 • www.Tucsonclayartcenter.com

Registration Form (please print)

Participant's Name _____ Phone _____

Email _____ Cell Phone _____

Address _____ City _____ Zip _____

Fall Session _____ Winter Session _____ Spring Session _____ Summer Session _____

Instructor _____ Class _____ Day and Time _____ Cost \$ _____

Instructor _____ Class _____ Day and Time _____ Cost \$ _____

TOTAL AMOUNT DUE: \$ _____

I have read and understand the cancellation refund policies.

Checks are payable to Clay Art Center. There is a \$30.00 service charge on all returned checks.

Please send your payment to:

Tucson Clay Art Center
1703 E. Fort Lowell Rd.
Tucson, Arizona 85719

Please direct any questions to:

info@tucsonclayartcenter.com

I/We, the undersigned participant(s), and parent(s)/guardian(s), do hereby consent to participation in the above program, including all activities of the program. I/We assume all responsibility for, and risks and hazards of, participation in the named program and agree to release from liability and hold harmless the Clay Art Center and/or its participants or visitors ("releasees") for all loss, damage, or injury that may occur therein, whether caused by the negligence of releasees or otherwise. I/We understand that NO REFUNDS will be issued unless classes are cancelled by Clay Art Center. The Clay Art Center has permission to use photographs of participants and their clay or ceramics for future promotions.

Signature _____ Date _____

CAC use only:

Date Received _____ Amount _____ CASH CREDIT CARD CHECK NO. _____