



www.playatart.com | 13 S. Haddon Avenue, Haddonfield, NJ 08033 | (856) 433-8784

Friday Clay Days | Registration | 2023

Ages 6-12

Please check all dates and times requested:

ages 4 - 8 yrs.: **mornings (AM)** 10 am - 12 pm | **lunch bunch (LB)** 12 pm - 1 pm | **afternoon (PM)** 1 - 3 pm

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|--------------------------------------|-----------------------------|-----------------------------|-----------------------------|--------------------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="radio"/> June 16 | <input type="checkbox"/> AM | <input type="checkbox"/> LB | <input type="checkbox"/> PM | <input type="radio"/> July 28 | <input type="checkbox"/> AM | <input type="checkbox"/> LB | <input type="checkbox"/> PM |
| <input type="radio"/> June 23 | <input type="checkbox"/> AM | <input type="checkbox"/> LB | <input type="checkbox"/> PM | <input type="radio"/> Aug. 4 | <input type="checkbox"/> AM | <input type="checkbox"/> LB | <input type="checkbox"/> PM |
| <input type="radio"/> June 30 | <input type="checkbox"/> AM | <input type="checkbox"/> LB | <input type="checkbox"/> PM | <input type="radio"/> Aug. 12 | <input type="checkbox"/> AM | <input type="checkbox"/> LB | <input type="checkbox"/> PM |
| <input type="radio"/> July 7 | <input type="checkbox"/> AM | <input type="checkbox"/> LB | <input type="checkbox"/> PM | <input type="radio"/> Aug. 11 | <input type="checkbox"/> AM | <input type="checkbox"/> LB | <input type="checkbox"/> PM |
| <input type="radio"/> July 14 | <input type="checkbox"/> AM | <input type="checkbox"/> LB | <input type="checkbox"/> PM | <input type="radio"/> Aug. 25 | <input type="checkbox"/> AM | <input type="checkbox"/> LB | <input type="checkbox"/> PM |
| <input type="radio"/> July 21 | <input type="checkbox"/> AM | <input type="checkbox"/> LB | <input type="checkbox"/> PM | | | | |

Child 1, name: _____ age: _____

Child 2 (sibling), name: _____ age: _____

Home address: _____

Parent, name: _____ cell #: _____

email: _____

Parent, name: _____ cell #: _____

Home address: _____

Adult other than parent permitted to pick-up: _____ relationship: _____

I do / I do not, give permission for my child to be photographed during class activities for parent communications or marketing purposes for P@A including social media (no names of children are ever listed or tagged).

PRICING **Single Session** (morning or afternoon) | **\$42** | \$35 (sibling)

Single Session plus **Lunch Bunch** (combines with either AM or PM class) | **\$67** (\$25 - lunch bunch)

Double Session (AM + Lunch Bunch + PM) | **\$94** | \$80 (sibling)

Child 1, number of weeks requested: _____ x (\$42, \$67 or \$94) \$ _____

Child 2 (sibling), number of weeks requested: _____ x (\$35, \$60 or \$80) \$ _____

Total \$ _____

Payments

To secure your child's reservation, please return completed registration and deposit. Registration forms can be delivered to the studio, or submitted via email: **robin@playatart.com** or text **(609) 209-6133**.

- Check** **Cash** | Checks should be made out to **Play at Art** and mailed to **13 S. Haddon Ave., Haddonfield, NJ 08033**.
- Credit card** | Credit card information is not shared with any other business, individual, or entity.

Card number: _____ exp. date: ____/____ csc code: _____ zip code: _____