

after school

ART

→ classes



and
**DON'T FORGET
SUMMER
CAMP!**

REGISTER ONLINE

LET'S DRAW!

We'll make new friends and explore art media such as *watercolor, pencil, charcoal, and pastel!*



OIL Pastel

LIQUID Watercolor



CHARCOAL



WWW.DREAMCLASSES.ORG

REGISTER ONLINE OR BY PHONE: 916-419-7644



Final Session: Last Chance to Take Drawing Classes this School Year



Afterschool Art Classes at Thomas Jefferson Elementary!

Class Details

Day of the week: Tuesday

Time: 3:10-4:10pm

Classroom: Room 19

Session D: 4/3, 4/10, 4/17, 4/24, 5/1, 5/8, 5/15

Registration Form

Please do not return this form to the school office.

To register using this form, please mail to:

Dream Enrichment Classes, 1820 Tribute Rd, Suite F Sacramento CA 95815

*The fastest way to register and **reserve your space**
is to **register online** at dreamclasses.org –*

Parent Name: _____

Parent Email: _____

Home Address: _____

Parent Cell Phone: _____

Parent Alternate Phone (required): _____

Alternate phone will be used when we cannot reach a parent on the main cell phone number.

Child Name: _____

Date of Birth: ____/____/____ Grade: _____

Known Allergies or Medical Conditions: _____

Release Option: Guardian pick-up from class Staff escort to after school care Independent release to parking lot or walk home

Does your child attend after school care? Yes No *Please choose "yes" even if your child only attends infrequently.*

KINDER QUESTIONS: If your child is a Kinder, is he/she: AM PM ALL DAY and what is his/her room # ? _____

Yes! Register us and save my child a seat for the last session of Firefly Art!

Session D: 4/3, 4/10, 4/17, 4/24, 5/1, 5/8, 5/15 One payment of \$112 OR Two payments of \$56

Two payments: \$56 due now, \$56 auto-charged 30 days from start of session

Payment and Waiver

VISA MC DISCOVER AMEX Check Payable to "Dream Enrichment Classes" (**No checks for payment plans, please**)

Credit Card Number: _____ Expiration Date : _____

Please read our after school class policies at: dreamclasses.org/policy It includes such information as medical liability, photo release, transfers, cancelation fees, refunds and discipline. By signing below, you acknowledge that you have both read and understood all policies outlined in the aforementioned document, including that you waive any right to claim against Dream Enrichment owners, staff and teachers in the event of an accident, injury or loss of personal items. A copy of this policy document will also be available in your confirmation email. If you have provided your credit card information, you agree to let Dream Enrichment charge your card for the items you have requested.

Parent Name: _____ Signature: _____

Your registration will not be processed without both payment and signature. Please call 916-419-7644 if you have any questions.

**Summer Camp Schedule will be LIVE March 1st on www.dreamclasses.org
Join us for art, LEGO building, coding, robotics and stop-motion animation camps!**

This program is held on the site/property of Roseville City School District. This program is not endorsed or sponsored by the District and is not staffed by District employees.