



# THIS CENTURY ART GALLERY

## ▲ WILLIAMSBURG ART CENTER ▲

219 North Boundary ▲ Box 388 ▲ Williamsburg, Virginia 23187 ▲ 757-229-4949 ▲ www.thiscenturyartgallery.org ▲ A Virginia Museum of Fine Arts Partner

### Youth Art Program Class Registration Form

Name of Child \_\_\_\_\_ Age \_\_\_\_\_

Name of Child \_\_\_\_\_ Age \_\_\_\_\_

Name of Child \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ email \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

My child has permission to participate in This Century Art Gallery (TCAG) art education classes. TCAG has my permission to use photographs of the class for media promotions.

\_\_\_\_\_  
(Parent/Guardian signature required.)

Class Title \_\_\_\_\_ Fee \_\_\_\_\_  
Instructor \_\_\_\_\_ Code \_\_\_\_\_ Day/Time \_\_\_\_\_

Class Title \_\_\_\_\_ Fee \_\_\_\_\_  
Instructor \_\_\_\_\_ Code \_\_\_\_\_ Day/Time \_\_\_\_\_

Class Title \_\_\_\_\_ Fee \_\_\_\_\_  
Instructor \_\_\_\_\_ Code \_\_\_\_\_ Day/Time \_\_\_\_\_

1 <sup>st</sup> student - full price. 2 <sup>nd</sup> and more - \$5 discount.	Class Fees	_____
	Less Sibling Discount*	_____
	Total	_____

**\*No sibling discount available for Super Saturday classes.**

Payment Method – Cash \_\_\_\_\_ Check # \_\_\_\_\_ Credit Card – Visa \_\_\_\_\_ MasterCard \_\_\_\_\_

Name on credit card \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

**Classes will be held at the Art Education Center,  
Unit #8, Williamsburg Crossing Shopping Center  
Advance registration is required.**

**Please mail or bring this completed form with your payment to:  
This Century Art Gallery, 219 North Boundary St., Williamsburg, VA 23187**

TCAG use only: Confirmed \_\_\_\_\_ Date Rec'd \_\_\_\_\_ Amount \_\_\_\_\_ Check/Cash/Charge