

STAMFORD CONTEMPORARY ARTS

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CLASS ENROLMENT FORM

COURSE: _____ TUTOR: _____

NAME: _____

ADDRESS: _____

POSTCODE: _____ TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

COURSE FEE: _____

Course Fees:

Tasters = 3 hours = £30, one off

Block booking of 10 x 3 hours = £300 or in separated blocks of 5 weeks = 2 x 5 = £300 or £150 for 5 lessons

Block of 6 x 2.5 hour drawing classes = £150

Whole Day classes (workshops) to be advised on application, dependent on media

REFUND POLICY:

No refund will be given for an art course, class, program or workshop if notice of withdrawal is not received at least two weeks before commencement. All refunds are subject to a £_____ administration fee.

PAYMENT: Prepayment with registration is required for all art classes and workshops. If the class/workshop is cancelled due to insufficient enrolment or for other unforeseen circumstances, the registered participant's payment will be returned or a full refund processed. Participants may choose to transfer their payment to another class

ALLERGEN POLICY: Stamford Contemporary Arts advises all program registrants suffering from allergenic medical conditions, documented or otherwise, that they register in art classes/workshops at their own risk. Stamford Contemporary Arts, its employees, tutors, contractors and volunteers make no representations, and will accept no liability, regarding presence or absence of all allergens at facilities where art programs take place.

I UNDERSTAND AND ACCEPT THE ABOVE TERMS AND CONDITIONS

SIGNED: _____ DATE: _____

Signature of Participant

PAYMENT INFORMATION DATE PAID _____ TAKEN BY _____

PAYMENT MADE BY: CASH DEBIT/CREDIT CARD

NAME ON CARD: _____ SECURITY NUMBER: _____

CARD NUMBER: _____ EXPIRY DATE (MM/YY): ____ / ____

POSTCODE CARD IS REGISTERED TO (if different from above) _____