

*Art Class
Studio Creations
Enrollment Information
2412 Loftsmoor Lane
Plano TX 75025
972 727 7433
www.paintingsbynelum.com*



Application for enrollment for the month of _____ Year _____

Child's Name _____

Home Address _____

Child's Date of Birth _____

Mother's Name _____

Work Phone _____ Cell Phone _____

Email _____

Father's Name _____

Work Phone _____ Cell Phone _____

Email _____

I hereby authorize to allow my child to leave the studio ONLY with the following person

Name _____ Driver's Lic No _____

Name _____ Driver's Lic No _____

*I hereby _____ give. _____ Do not give my consent for my child to participate in field trips.
(To go out of the premises for sketching)*

Special interest _____

My child is attends the following school _____

Signature of Parent _____ Date _____

