

# REGISTRATION

Registration is on a first-come, first-served basis.\* All registrations must be accompanied by full payment. Payment may be in the form of a check or as a charge to a MasterCard, or VISA. All checks should be made out to The Cultural Arts Center at Glen Allen (CACGA). Please use the form below when registering. \*Classes are open to adults 18 years old and up unless otherwise stated. **A \$10 last minute registration fee applies to registrations received within 7 days of the class starting.**

## Payments may be:

- phoned in to 804-261-ARTS (2787); Mon-Fri., 9am-5pm
- mailed to CACGA, Attn: Class registrant, P.O. Box 1249, Glen Allen, VA 23060
- hand or special delivered to CACGA, 2880 Mountain Road, Glen Allen, VA 23060

## Cancellation of classes by CACGA

If an insufficient number of registrations are received for any individual class, the class may be canceled. If this occurs, a full refund will be processed for those currently registered in the class. Online registration will be refunded by check.

## Cancellation by student

Cancellations will be accepted by phone at 804-261-ARTS(2787). Cancellations received seven days or more prior to the first class will receive a 50% refund of the class fees. Cancellations received less than seven days prior to the first class will not receive a refund.

### Please PRINT all information:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (day) \_\_\_\_\_ (evening) \_\_\_\_\_

Email address \_\_\_\_\_

Child's Age (if under 18) \_\_\_\_\_ Guardian Name \_\_\_\_\_

1. Class Title \_\_\_\_\_

Start Date \_\_\_\_\_ Cost \_\_\_\_\_ Fee \_\_\_\_\_

2. Class Title \_\_\_\_\_

Start Date \_\_\_\_\_ Cost \_\_\_\_\_ Fee \_\_\_\_\_

3. Class Title \_\_\_\_\_

Start Date \_\_\_\_\_ Cost \_\_\_\_\_ Fee \_\_\_\_\_

## Method of Payment

Subtotal Amount \$ \_\_\_\_\_

\$10 last minute registration fee (registering less than a week prior to class beginning) \$ \_\_\_\_\_

Donation to Annual Fund \$ \_\_\_\_\_

Total Amount \$ \_\_\_\_\_

(Acct. 412-100)

Check # \_\_\_\_\_ Cash Amount \$ \_\_\_\_\_

Visa/MC # \_\_\_\_\_ Security Code \_\_\_\_\_

(last 3 digits on card back)

Expiration Date \_\_\_\_\_ Signature \_\_\_\_\_

How did you hear about these classes? \_\_\_\_\_

Have you participated in any Center classes in the past? If yes, which one(s)? \_\_\_\_\_

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