



CLASS REGISTRATION FORM

STUDENT: _____

DATE OF BIRTH: ____/____/____ AGE: _____ Grade: _____

ADDRESS: _____

CITY: _____ ZIP: _____

PARENT/GUARDIAN: _____

CONTACT: HOME PHONE: (____)____-_____

CELL PHONE: (____)____-_____ Email: _____

\$70. (1 st month tuition) \$40. (workbook/pattern packet) \$10. (classroom supply fee) Total Due at Registration: \$120.	<input type="radio"/> Monday	<input type="radio"/> 4 – 5 pm
	<input type="radio"/> Tuesday	<input type="radio"/> 5:10 – 6:10 pm
	<input type="radio"/> Wednesday	
	<input type="radio"/> Thursday	
	<input type="radio"/> Friday	

**Please make check payable to Karen Krug.
If mailing, please call or email to obtain address.**

HOLD HARMLESS AGREEMENT:

I understand the sewing instructor(s) will do their best to prevent an accident from occurring, however, I, the undersigned, agrees to hold instructors of Just Sew You Know harmless for any accident that may occur to me or my child while attending or in the process of attending sewing class and while attending any sewing activities held by the sewing instructor(s).

Parent/Guardian

Signature: _____ Date: _____