



\_\_\_\_\_ Member Last Name

\_\_\_\_\_ Member First Name

Date of Birth: \_\_\_\_\_ Grade Level at Entry: \_\_\_\_\_

Primary Parent/Guardian Name: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Second Parent/Guardian Name: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Allergies: \_\_\_\_\_

Food Allergies: \_\_\_\_\_

Food/Food Products not allowed: \_\_\_\_\_

Medications Required: \_\_\_\_\_

Dose: \_\_\_\_\_

Schedule: \_\_\_\_\_

Doctor Note on File: \_\_\_\_\_

Medications Required: \_\_\_\_\_

Dose: \_\_\_\_\_

Schedule: \_\_\_\_\_

Doctor Note on File: \_\_\_\_\_

Special Needs/Notes: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved for Pick up:	_____	P/G Initials: ___
Approved for Pick up:	_____	P/G Initials: ___
Approved for Pick up:	_____	P/G Initials: ___
Approved for Pick up:	_____	P/G Initials: ___
Approved for Pick up:	_____	P/G Initials: ___

I \_\_\_\_\_, and \_\_\_\_\_  
(Parent/Guardian 1) (Parent/Guardian 2)

Do hereby agree and contract to register the following:

\_\_\_\_\_  
Child #1 Full Name

\_\_\_\_\_  
Child #1 Full Name

\_\_\_\_\_  
Child #1 Full Name

\_\_\_\_\_  
Child #1 Full Name

With the D'Arezzo Center for Creative Education for a minimum of one Month, Single Subject or more, or One Enrichment Session or more beginning with \_\_\_\_\_. I have also agreed to pay a \$50.00 (Fifty Dollar) non-refundable registration and materials fee and the related curriculum fee according to the sessions registered for. I also agree to pay for each month in advance prior to the 1<sup>st</sup> of each month I register my child(ren) for. By signing this agreement, I agree to the Program Session Policies stated below.

Signed,

\_\_\_\_\_, and \_\_\_\_\_  
(Parent/Guardian 1) (Parent/Guardian 2)

## **D'Arezzo Creative Education Program Session Policies**

Discounts, and Cancellation Information, Refund Policy and REGISTRATION POLICIES:

Each family agrees to the following policies upon registering their child:

Registration is on a first-received, first-enrolled basis until the maximum Session size is reached. If a Session is cancelled, we will notify you at least 24 hours prior to the start of Session. Refund eligibility is not based upon your reason for being unable to attend a Session, even if that reason is beyond your control. It is based solely upon the timing of your refund request, as follows:

- If we receive your request at least one month (30 days) prior to the first day of the Session, you will receive a full refund, less a 20% cancellation fee. We do NOT give full refunds due to the fact that we incur fees at the time of your registration. Cancellation fees cover these costs when you cancel.
- If we receive your request less than one month (29 days or less) prior to the first day of the upcoming month, you are not eligible for a refund; however, a Session credit less a 15% cancellation fee will be offered for future Courses. The participant will have until the end of the same academic year to redeem this credit, after which time it will be considered void. This policy also applies to Payment Plan participants.
- If we receive your request once the Month has begun, there are no refunds and you will be responsible for any remaining Session fees that are unpaid.
- All Sessions require advance enrollment, payment, deposit or proof a voucher/certificate has been ordered in order to be guaranteed a spot in the Session. You will receive a confirmation email after your registration has been completed.

Refund requests must be made via email. We do not accept refund requests over the phone or in person (please respect this).

- Send requests via email to [darezzocenter@gmail.com](mailto:darezzocenter@gmail.com).

- Include your full name, phone number, email address, name of your child, child's age, Session: Title, Number, Day and Time, begin date, and exact amount of payment.

Changes in Policy and Session Schedule:

D'Arezzo Creative Education reserves the right to combine, add, delete or change sessions.

D'Arezzo Creative Education also reserves the right to make changes in faculty, program/session calendar and in any general or specific organizational policy.

Attendance:

To derive the full benefit of the enrichment programs at DCE, it is essential that absences and tardiness be kept to a minimum. The activities are based on participation; therefore, regular attendance is necessary to successfully benefit from them. There are no make-up times, credits or refunds for time missed under any circumstances.

Payment Plans:

Payment plans and scholarships will be on a case-by-case basis only. Please contact Joseph Natale [darezzocenter@gmail.com](mailto:darezzocenter@gmail.com) to see if you qualify.