



Class & Workshop Registration Form

111 S. Grand Ave. Bozeman, MT 59715 | (406) 587-9797 ext. 104 | www.TheEmerson.org | education@theemerson.org

Date _____

Student name (info below needed if under 18) _____

Student age (if child or youth) _____ Guardian name _____

Allergies or health issues we should know about? _____

Contact Information (must be number that can be reached during class hours)

Primary #: _____ Secondary #: _____

Mailing address _____

City _____ State _____ Zip _____

Email: _____

How did you hear about us?:

Website Ads Class instructor Other: _____

Emerson Member? Yes No New (indicate membership payment)

\$40 Individual (Over 18)

\$75 Family

	Class title	Dates	Tuition
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____

The Emerson prefers payment by check if possible: check # _____

If checks are unavailable these credit cards may be used:
(circle one) AMEX MC VISA

Last 4 digits of CC: _____

Exp. _____ / _____ CID: _____

Total PAID:

Signature of parent/ Participant _____

If registration is completed over the phone a verbal agreement is required:

Yes, parent/ participant agrees to the terms of this registration _____ .

No, parent/ participant disagrees with the terms of this registration _____

Photo permission opt out: (signature of parent/ participant): _____

The Emerson Center's Education Program Policies:

Signing this form indicates that you understand and agree to the following:

Class Refund:

If participant must cancel after registering for any Emerson class/program, the participant must provide notification of the cancellation to Emerson Staff **one week prior** to the class start date in order to receive 50% tuition refund.

Participation Policy:

Emerson staff reserves the right to dismiss disruptive individuals or students with behavioral difficulties.

Photo Waiver:

Emerson can use photographs taken during classes for documentation, future ads and marketing unless indicated otherwise in the photo permission section of this form.