

\_\_\_\_\_  
Name (Parent or Guardian if student is under 18)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State ZIP Code

\_\_\_\_\_  
Home Phone Work Phone

\_\_\_\_\_  
Cell Phone Emergency Phone

\_\_\_\_\_  
Email address (if you presently do not receive email notices from us)

Are you a BAAC Member?

- Yes – current
- Joining/Renewing
- No

Taken classes here before?

- Yes
- No

How did you hear about us?

Student's Name	Age	Gender	Course #	Course Cost	Office Use

**Start or renew your BAAC membership and save!**

BAAC Membership is valid for one calendar year from the date you sign up and entitles you to 20% off each class registration and 10% off gallery shop purchases.

If you have questions call the BAAC offices at (812)334-3100.

\* Student membership for students 16 yrs. And older.

**\*\* Early Bird Discount – Register one week before the start of a class to receive \$5 discount.**

Levels

- Student \* \$30
- Individual \$50
- Family \$75
- Friend \$100
- Premier \$250

			Membership
\$			Scholarship
			Subtotal
			<b>Early Bird **</b> - \$5
			<b>TOTAL</b>

**Liability Waiver:**

I recognize that, because of the potentially hazardous nature of this activity, an injury maybe sustained. In the event of such an injury to myself or my child, if I or my spouse cannot be contacted, I give my permission to the attending physician to render treatment. I now release the Bloomington Area Arts Council/John Waldron Arts Center, its employees, agents and assigns from responsibility for any personal injuries to property caused by or having any relation to the activity. I understand that this release applies to any present or future injuries and that binds my heirs, executors and administrators. Unless notified in writing at the time of registration, this registration permits any visual record of student's or their artwork for educational or publicity purposes. My registration acknowledges my full understanding of the above mentioned items.

**PAYMENT METHOD:**

Checks made payable to BAAC  
Payment:

- Cash
- Mastercard
- Visa
- Check # \_\_\_\_\_

\_\_\_\_\_  
Credit Card #

\_\_\_\_\_  
Expiration Date (mm/yr)

Date:	CC# Authorization Number:	Recorded in Signup Book
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