



Masters School of Art

Christian Center for the Arts

Foundational Studies Program

Student Application

Thursday School

Friday School

Student Name _____ Date of Birth _____

Parents Name: (applicable only for students under 21)

1 _____ 2 _____

Home Phone _____ Alternate Number _____

Parents Emails: _____

Student Email: _____

Address: _____

Registration for Term:

_____ Fall Term	_____ Spring Term	Fall + Spring combined
Reg. Fee \$35	Reg. Fee \$35	Full Year
		Reg. Fee \$60

In Case of Emergency:

1 _____ 2 _____

Phone: _____ Phone: _____

What hours will student be attending?
(circle all that applies)

1st period	2nd period	3rd period	4th period	5th period
9:00am - 10:10am	10:15am - 11:10am	12:15pm - 1:10pm	1:15pm - 2:10pm	2:15pm - 3:10pm

How did you hear about us? _____

\$35 Non-Refundable Application Fee or \$60 if registering for full year (Fall & Spring combined)

Make Checks Payable to: Masters School of Art

**Send Payment & Application to: Masters School of Art
P.O. Box 82
Clackamas, OR 97015**

Please check one of the following:

- I will support/participate in the school fundraisers (purchase or sell calendars, donate at least one item to the auction, volunteer at least one time each term, and support other fundraisers).
- I would rather not volunteer or be involved in the school's fundraisers. I prefer to pay an additional \$15/month for tuition (for those taking 2 or more classes).