Fine Arts Society of Milton (FASM) P.O. Box
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Youth Visual Arts Mentoring PROJECT
A Fine Arts Society of Milton Initiative

Youth Visual Arts Mentoring Program Registration Form & Participant Agreement

PLEASE print clearly

Name of Youth:_____ Email:_____

Name of Parent:_____Email:_____

Parent Telephone: Home_____Cell:_____

Address:_____
street city postal code

__ Yes, I am able to attend the 5 workshops detailed in the cover letter.
__ No, I am not able to attend all workshops. Reason:_____

Check List to accompany Registration Form:

__Questionnaire __Photo Release Form __Participant Agreement (below)

Participant Agreement

I, _____ agree to the following:

I understand that participation in the art exhibition held in the Holcim Gallery is conditional on my attendance at the workshops and as such I agree to attend the workshops to the best of my ability.

If I am unable to attend due to illness, etc., I agree to notify the designated Fine Arts Society of Milton (FASM) Coordinator and Facilitator at **fasmyouth@gmail.com**

I agree to act in a respectful manner towards other participants, mentors and volunteers and refrain from offensive, racist or threatening language or behaviour.

I agree to attend all workshops, art exhibition opening reception, etc. not under the influence of any alcohol or illicit drugs.

I understand that if I do not abide by these guidelines, FASM will meet and discuss with the YVAMP staff, my parents and myself to address the issue. If the issue cannot be resolved, FASM reserves the right to withdraw me from the Youth Visual Arts Mentoring Program.

I understand that the $50.00 registration fee must be paid in advance of the program accompanied by this form. I also understand that any art materials and supplies I need fro the workshops and the art show are my responsibility and there is no financial compensation from FASM.

Name of Youth:_____ Signature:_____

Name of Parent:_____Signature:_____

Date:_____