



**DAIRY BARN
MEMBERSHIP
BENEFITS**

Receive 10% discount off classes and workshops by becoming a Dairy Barn member. Other benefits include free admission to all exhibits, invitations to special events, gallery shop discounts, subscription to our newsletter. Artist level memberships gain access to meeting and studio time and many more benefits! For more information or to become a member, go to our Website www.dairybarn.org and follow the "Get involved Button".



Registration Form for Classes & Workshops at The Dairy Barn Arts Center

Class/Workshop Title: _____

Class/Workshop Number: _____

Workshop Date (s): _____

Name: _____

Are you Over 18? Circle: **Yes** **No** If no, please see bottom of page

Address: _____

City _____ **Zip** _____

Home Phone: _____ **Cell:** _____

Email: _____

Are you a member? Circle: **Yes** **No**

Work Shop Fee: _____

Would you like to receive our news letter with information about future classes and workshops? Circle: **Yes** **No**

Payment Information

Please make checks payable to the Dairy Barn Arts Center and include the class number in the memo section.

By Credit Card

Exp. _____

Security Code _____

Card Holders Signature

*once payment is received, credit card number will be blacked out and NOT kept on file!

You can mail or drop off payment and registration form to:

Attention Lyn

The Dairy Barn Arts Center, P.O.
Box 747, Athens Ohio, 45701

Cancellation and Deadlines

All workshops and classes at the Dairy Barn have a **registration deadline**. Generally this deadline is 10 days before the workshop or class is scheduled. These deadlines are listed on all flyers and web-postings regarding all classes and workshops. Registration forms must be received by the Education Director before that date. Because there is a minimum requirement in attendance for each class and workshop to be able to run, payments will not be processed until that minimum is met. In the event a workshop needs to be cancelled, all people who signed up will be notified and their payments destroyed, or returned depending on their preferences. Refunds will **ONLY** be given in the event that minimum enrollment is not met or for any other reason the workshop is cancelled.

FOR MINORS:

I also give permission for my child to participate in this Dairy Barn workshop or class and corresponding activities. In case of accident or serious illness, I request that I/we be contacted. I give permission for emergency medical treatment and to be transferred to the nearest medical facility. I agree to assume all costs related to such treatment and I release the Dairy Barn from any responsibility for injury or illness that may occur while my child participates.

Parent or Guardian Name (Print): _____ **Signature:** _____ **Date:** _____

Please check here if you **do not** wish your child to be photographed for press and publicity. _____

Allergy or special needs? _____