

**Adult Registration for Kathy Anderson's School for Young Artists 2007 – 2008**

Today's Date

Student (full name)

Birth date

Occupation

**Accounting statement should go to**

Same

Or ... Name

Occupation

Mailing Address

**PRIMARY EMAIL ADDRESS FOR ACCOUNTING STATEMENT**

The primary way we will contact you is through your Email address. Email address

Your Email will be kept in strict confidence. We do not share our mailing list with anyone.

Mailing address

Street or PO Box

City

State, Zip Code

Cell Phone

Home Phone

Work Phone

In the event of an unexpected cancellation and we are unable to reach you, please give us an alternate contact person.

Name

Email address

Your Email will be kept in strict confidence. We do not share our mailing list with anyone.

Cell Phone

Home Phone

Work Phone

Mailing address

Street or PO Box

City

State, Zip Code

Members of the school who refer a family signing up for 2 four-class series or, one eight-class series receive one free class.

Please tell us who referred you.

Kathy Anderson's School for Young Artists (845) 679-9541 [kanderson4@hvc.rr.com](mailto:kanderson4@hvc.rr.com)  
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