

**ALReADY
ARTISTS
STUDIO**
registration form*

Kiddo's name: _____

Birthday (month/day/year): _____

Home phone: _____

Mother & cell phone: _____

Father & cell phone: _____

Nanny, step-parent, personal assistant, big brother,
big sister, Granny, Pop, neighbor or anyone else
dropping off or picking up kiddo & cell phone: _____

Email address (necessary): _____

Home address (optional): _____

In the extremely unlikely case of emergency
alternate back-up contact & cell phone: _____

Allergies, idiosyncrasies, or anything
pertinent that we need to know about: _____

Your class choice (day & time): _____

Located at 37 Maryland Avenue, Annapolis, MD 21401. Contact info@alreadyartists.com.

*Number 2 pencil not required. Please feel free to color outside the lines, doodle in the margins, fold, spindle or mutilate. Filling out forms can be fun.