

North Charleston Cultural Arts Department

P.O. Box 190016

North Charleston, SC 29419-9016

Phone: (843) 740-5854

E-mail: culturalarts@northcharleston.org

Website: www.northcharleston.org

To register by mail send in the form below and payment in full: City of North Charleston Cultural Arts Department, P.O. Box 190016, North Charleston, SC 29419-9016.

To register in person come by the Cultural Arts Office located in North Charleston City Hall, 2500 City Hall Lane, North Charleston, SC 29406. Monday-Friday 8:30-4:30. Please call for details: (843) 740-5854.

CLASS/ WORKSHOP REGISTRATION FORM

Participant's Full Name: _____ SEX: _____ DOB: _____

Address: _____ City: _____ State: _____ ZIP: _____

Parent or Guardian's Name (if under 18): _____

Home Phone: _____ Business Phone: _____

Email: _____ Cell Phone: _____

In case of emergency: _____ Phone: _____

Class/ Workshop Name: _____

Day: _____ Time: _____ Starting Date: _____

Fee Paid \$: _____ Cash _____ Check # _____ Money Order _____

(* Please make checks payable to the City of North Charleston)

Receipt #: _____

In consideration of the acceptance of my entry, I hereby, for myself, my child, my heirs, executors and administrators, waive and release any and all rights and claims for damages I or my child may have against the North Charleston Cultural Arts Department and its representatives, successors, and assigns for any and all injuries suffered by myself or my child at any activity sponsored by this group. I do hereby grant permission to the City of North Charleston Cultural Arts Department the use of photographs of me or my child in advertisements, publications, and or any other collateral materials. I do hereby certify all of the above information to be correct and true.

Participant's or Parent/Guardian's Signature: _____ Date: _____

Office Copy

Participant Copy

Instructor Copy