

# ADULT REGISTRATION FORM

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell/Work Phone: \_\_\_\_\_

\_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

<u>Name</u>	<u>Program #</u>	<u>Program Name(s)</u>	<u>Fee</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL FEE \_\_\_\_\_

\*ALL INFORMATION MUST BE COMPLETE TO PROCESS APPLICATION\*

Please note: some lab fees are payable directly to the class instructor.



Signature \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

\* Make checks payable to: FIREHOUSE ARTS

\* Please mail or drop off with forms to: Firehouse Arts at Winslow Station  
20 Center Street, Yarmouth ME 04096

\* Questions? Please contact us through our website: [FirehouseArtsME.com](http://FirehouseArtsME.com)