

ADULT PROGRAM REGISTRATION Winter 2026



Participant Information:

Name:					
Address:		City:		Zip:	
Email:		Phone:			
Emergency Contact:			Relationship:		
Emergency Contact Phone:					

New Participants: First-time attendees must complete a one-time *Student Enrollment Form* and may attend an optional orientation prior to participating in multi-week classes at ACT. Please check if participant is new to ACT: ☐

Caregiver Information: ACT's priority is to ensure students receive all needed accommodations; all students are permitted to attend with a caregiver if needed. Will the student be in class with a direct assistance caregiver? ☐ Yes ☐ No

WINTER Class Selection:

☐	Ukulele Club ONLY: Mondays, 4:00-4:45pm (12 sessions)	\$ 120
☐	Monday Music Combo - Ukulele Club AND Treble 5 Drummers (ACTION Drummers): Mondays, 4-5:45pm (24 sessions)	\$ 240
☐	WAIT LIST for Treble 5 Drummers (ACTION Drummers) ONLY: Mondays, 5-5:45pm (12 sessions)	
☐	Bass 6 Drummers (ACTION Drummers): Mondays, 6:00-6:45pm (12 sessions)	\$ 120
☐	From Story to Sculpture: Tuesdays, 4:00-5:00pm (12 sessions)	\$ 130
☐	Theatre Explorations: Tuesdays, 5:15-6:15pm (12 sessions)	\$ 130
☐	Winter ACTION Choir: Thursdays, 12:10-1:10pm (11 sessions)	\$ 130
☐	New Year Event Series - Drum Circle: Monday, January 5 (5-6pm)	\$ 10
☐	New Year Event Series - Make a Myth Movie Night: Tuesday, January 6 (5-6:45pm)	\$20
☐	*In-Person OR Virtual* Private Art Instruction: ____ sessions	See website
Section Total		

**Classes require a minimum number of participants. If not reached, class will be canceled, and registered participants will receive a full refund or credit.*

TShirt Selection:

☐	Ukulele Club TShirt (red)	\$15
☐	ACTION Drummers TShirt (black)	\$15
☐	ACTION Choir TShirt (blue)	\$15
☐	ACT General TShirt (black w/green ACT logo)	\$25
Size (circle one): S M L XL 2XL		
Section Total		

Please sign the back of the form →

Would you like to add a 100% tax deductible donation to ACT?

Your donation will fund scholarships for students with financial need. Thank you for helping keep ACT programs accessible!

☐	\$25 donation	\$25
☐	\$50 donation	\$50
☐	\$100 donation	\$100
Section Total		

Grand Total Due	
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Class payments are due by the first day of class.

Payment:

☐ Cash	Enclosed? ☐					
☐ Check	Check Number:		Enclosed? ☐			
☐ Credit Card	Cardholder/name on card:		Billing ZIP:			
	Card #:		CVV:		Exp:	/

Checks and this form can be mailed to:

Artists Creating Together
1140 Monroe Ave NW, Suite 4101
Grand Rapids, MI 49503

Assumption of the Risk and Waiver of Liability

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury, including exposure and/or transmission of COVID-19, to my student(s), caregivers or myself, of any kind, that I or my student(s) may experience or incur in connection with my student(s) participation in ACT programming ("Claims"). On my behalf, and on behalf of my student(s), I hereby release, covenant not to sue, discharge, and hold harmless ACT, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of ACT, its employees, agents and representatives.

Name of Parent/Guardian: _____ Signature: _____ Date: _____