ADULT PROGRAM REGISTRATION **Winter + Spring 2027**

Participant Information:

Name:					
Address:		City:		Zip:	
Email:		Phone:			
Emergency Contact #1:		Relationship:			
Emergency Contact Phone:					
Emergency Contact #2:		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
☐	**Digital Art:** Tuesdays, 4:00-5:00pm *(11 sessions)*	$ 110
☐	**Costumes:** Tuesdays, 5:15-6:15pm *(12 sessions)*	$ 120
☐	**Winter ACTion Choir:** *Thursdays, 12:15-1:15pm (12 sessions)*	$ 120
☐	**Night at ACT - Silent Disco:** *Monday, 1/4, 5-6pm (1 session)*	$10
☐	**Night at ACT - Cupcake Decorating:** Tuesday*, 1/5, 5-6pm (1 session)*	$10
	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.*

Spring Class Selection:

☐	**Ukulele Club ONLY:** Mondays, 4:00-4:45pm *(8 sessions)*	$80
☐	**Monday Music Combo - Ukulele Club AND Treble 5 Drummers (ACTion Drummers):** Mondays, 4-5:45pm (17 *sessions*)	$170
☐	**WAIT LIST for Treble 5 Drummers (ACTion Drummers) ONLY:** Mondays, 5-5:45pm (9 *sessions*)	
☐	**Bass 6 Drummers (ACTion Drummers):** Mondays, 6:00-6:45pm *(9 sessions)*	$ 90
☐	**C3ubed: Community x Collaborative x Creative:** Tuesdays, 4:00-5:00pm *(8 sessions)*	$ 80
☐	**Dance Disco Pop:** Tuesdays, 5:15-6:15pm *(9 sessions)*	$ 90
	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.*

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Spring Class Selection (continued): Science and Art series (Thursdays, 12:15-1:15pm)

☐	**ALL Science and Art classes in series:** *(7 sessions)*	$90
	(or register for individual session dates):	
☐	**April 15 - Birding with John @ Reeds Lake**	$15
☐	**April 22 - Slime with Kait**	$15
☐	**April 29 - Paper airplanes with Betsy**	$15
☐	**May 6 - Movement with Natalie**	$15
☐	**May 13 - Light and Shadows with Jess**	$15
☐	**May 20 - Planets with Betsy**	$15
☐	**May 27 - New Growth Project Tour at their Rockford farm**	$15
	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	

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	

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

Please sign the last page →

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: _____

Please sign the last page →