

2012 REGISTRATION FORM 1/3

STUDENT INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>
student last name	student first name	date of birth (mm/dd/yyyy)
<input type="text"/>		<input type="text"/>
street		apartment no.
<input type="text"/>	<input type="text"/>	<input type="text"/>
city	state	postal code
<input type="text"/>	<input type="text"/>	<input type="text"/>
student home phone (000.000.0000)	student cell phone (000.000.0000)	student email
<input type="text"/>		

for students enrolling in music courses, what instrument do you play?

HOW DID YOU HEAR ABOUT OUR PROGRAM?

<input type="checkbox"/> poster/brochure	<input type="checkbox"/> postcard	<input type="checkbox"/> email	<input type="checkbox"/> portfolio day	<input type="checkbox"/> newspaper	<input type="checkbox"/> online ad
<input type="checkbox"/> online search	<input type="checkbox"/> friend/family	<input type="checkbox"/> teacher/counselor	<input type="checkbox"/> other:	<input type="text"/>	

WHAT IS YOUR ETHNICITY? (OPTIONAL DEMOGRAPHIC INFORMATION)

<input type="checkbox"/> African-American	<input type="checkbox"/> Asian or Pacific Islander	<input type="checkbox"/> Caucasian/non-Hispanic	<input type="checkbox"/> Chicano/Latino/Hispanic	<input type="checkbox"/> Native American	<input type="checkbox"/> Non U.S. Citizen
<input type="checkbox"/> other:	<input type="text"/>				

PARENT INFORMATION

<input type="text"/>	<input type="text"/>	
parent last name	parent first name	
<input type="text"/>	<input type="text"/>	
parent home phone (000.000.0000)	parent cell phone (000.000.0000)	<input type="text"/>
<input type="checkbox"/> address is the same as student address		parent email
<input type="text"/>		<input type="text"/>
street		apartment no.
<input type="text"/>	<input type="text"/>	<input type="text"/>
city	state	postal code

EMERGENCY CONTACT

<input type="checkbox"/> same as parent information	
<input type="text"/>	<input type="text"/>
last name	first name
<input type="text"/>	<input type="text"/>
phone	relationship to student

2012 REGISTRATION FORM 2/3

CLASSES

1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	course number	course title	day and time	\$ tuition
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	course number	course title	day and time	\$ tuition
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	course number	course title	day and time	\$ tuition
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	course number	course title	day and time	\$ tuition
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	course number	course title	day and time	\$ tuition
6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	course number	course title	day and time	\$ tuition

Are you interested in staying with us?

Information and applications for Summer at Cornish Housing are found at www.cornish.edu/summer/housing or by contacting the Summer Program Coordinator at summer@cornish.edu or 206.726.5148.

<input type="text"/>
\$ subtotal
<input type="text"/>
scholarship/promo code
<input type="text"/>
\$ total due

PAYMENT

Choose a payment method.

- money order
 check
 visa
 mastercard
 AmEx

CREDIT CARD INFORMATION (IF PAYING BY CREDIT CARD)

<input type="text"/>	<input type="text"/>
credit card number	expiration date
<input type="text"/>	<input type="text"/>
name as it appears on card	verification code

AGREEMENTS & PERMISSIONS

- I have read and understand the Cornish Student Conduct Policy
 I have read and understand the Withdrawal & Refund Policy
 I agree to the Cornish College of the Arts Terms of Liability
 I grant Cornish College photo permissions

<input type="text"/>	<input type="text"/>
signature	date (mm/dd/yyyy)

Mail the registration form to

Cornish College of the Arts
 Summer at Cornish
 1000 Lenora St.
 Seattle WA 98121

phone 206.726.5148

email summer@cornish.edu

web www.cornish.edu/summer

For Office Use Only

- address checked
 payment amount checked
 registration date

2012 REGISTRATION FORM 3/3

CORNISH COLLEGE OF THE ARTS STUDENT CONDUCT POLICY

Summer at Cornish is oriented toward creative, focused, independent young people that will take initiative both in and outside of the classroom. Parents and students seeking a highly sheltered environment should consider this program carefully before applying. Be aware that while most learning will take place in the Cornish studios, the College believes in the importance of experiential education and some faculty may have their students working in the urban environment taking photographs, walking, drawing, and gathering inspiration. In these instances, they will be accompanied by the faculty member or traveling in small groups. Students are expected to arrive to all classes on time and attendance is critical. If an emergency presents itself and the student will be absent or tardy, he or she is encouraged to call the Summer Program Coordinator at 206.726.5148.

Cornish maintains a zero tolerance policy for all illegal activities, including possession or use of drugs or alcohol, or firearms, whether on or off the Cornish campus. At the discretion of the College, any student in violation of policies or otherwise creating an unsafe or unproductive climate may result in such sanctions as a warning or immediate dismissal.

CORNISH COLLEGE OF THE ARTS WITHDRAWAL & REFUND POLICY

In the event of withdrawal, all registrants may request a full refund seven (7) days prior to the start of the course or workshop. Contact the Summer Program Coordinator at 206.726.5148 to request refunds.

CORNISH COLLEGE OF THE ARTS TERMS OF LIABILITY

I understand that classes and activities in and outside of courses at Cornish College of the Arts can present a risk of injury to the participant. I understand that there is an inherent risk of injury that cannot be eliminated regardless of the care taken to avoid injury. I agree to assume that risk in order to participate in these activities.

I acknowledge that the participant is in good health and does not have any history of a medical or physical condition that would place the participant at risk due to the participant's medical or physical condition.

I do hereby release and forever discharge Cornish College of the Arts, their predecessors and successors, employees, agents and assigns, and all other persons, corporations, and entities from all claims, expenses, attorney fees, and causes of action or suits of any kind or nature associated with the participant's involvement with Cornish classes and college activities.

CORNISH COLLEGE OF THE ARTS PHOTOGRAPHY RELEASE

I grant Cornish College of the Arts the right to take photographs of me/my student in connection with Summer at Cornish. I authorize Cornish College of the Arts and its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that Cornish College may use such photographs with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.