

Registration Form 2025/26

Cash Receipt
For Office Use

Mail form w/ full payment to:
THE ART LEAGUE SCHOOL
 105 NORTH UNION STREET
 ALEXANDRIA, VA 22314
 or **register online** at www.theartleague.org

School Office

 Tel: 703-683-2323
 Hours: Mon–Sat,
 10:00am to 5:00pm

STUDENT INFORMATION

Name _____ Email (for notifications) _____

Address (check if new address) _____

City _____ State _____ Zip Code _____

Day Phone _____ Eve Phone _____

If applicable: Minor's Age _____ Minor's Adult Contact _____

Emergency Contact & Phone _____

New to our School? yes no New to the Course(s)? yes no

Heard about the school by:

Word of Mouth Catalog Social Media Web search Online ad Torpedo Factory Other

COURSE INFORMATION

Term: Fall Winter Spring Summer and/or: Workshop* Camp

Course Title _____ Instructor _____ Day/Time _____ Cost _____	Course Title _____ Instructor _____ Day/Time _____ Cost _____
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If applicable: *Workshop Date(s) _____ & _____

REGISTRATION BY MAIL ONLY: PAYMENT INFORMATION

Payment enclosed (check/money order payable to The Art League, no cash by mail please).

Yes, I would like to include \$2 with my payment to support the Student Scholarship Fund (or other amount: _____)

VISA MasterCard Discover

Card # _____ Exp. Date ____ / ____ 3-Digit Security Code _____

Cardholder's name (please print) _____ Cardholder's signature required _____

All Students:

By submitting this form you indicate that you agree to abide by the school policies (see page 1) including the refund policy that states, "No refunds are given unless we are notified ten days prior to a workshop or camp, or the Friday prior to the start of term for classes". The Art League reserves the option of refusing admission to any person deemed incompatible with any class group due to disruptiveness, or for any impediment to the learning process of the group as a whole. The Art League reserves the right to substitute an appropriate instructor when necessary. There is a nonrefundable registration fee of \$20 (this fee is included in the tuition).

Signature required _____ Name (please print) _____