

SUMMER ART EXPLOSION



REGISTRATION APPLICATION (*Please register each participant separately)

Child's Name _____ Age _____
(as of June 2021)

Parent(s)/Guardian(s): _____

Email Address(es): _____

Phone Number(s): _____ T-Shirt Size _____

Mailing Address: _____

Please submit registration form and fee to:
Johnson Center for the Arts
300 E. Walnut Street | Troy, AL 36081 |
(334)670-2287

Or complete the form and email to arts@jcatroy.org
Credit card payments accepted at www.jcatroy.org/pay-here
\$75 non-refundable deposit by May 24. Full Payment of \$150 due by June 7.

For Office Use Only:

Registration Fee Paid on _____ Received By _____