

Summer Crafts Sessions Registration Form

Participant Information

Full Name: _____

Parent/Guardian Name (if applicable): _____

Phone Number: _____

Email Address: _____

Address: _____

City/State/ZIP: _____

Age Group:

Child Teen Adult

Emergency Contact Name & Phone: _____

Select Your Summer Crafts Sessions

Crafts & Sewing Classes

- Crocheting for Beginners
 - Basic Crochet Stitches
 - Hand Embroidery with Hoop
 - Peg Knitting
 - Basic Sewing
 - Home Decorations
 - Pillow Making
 - Dish Towel Designs
 - Arts & Crafts
 - Paper Crafts
 - Flower Creations
 - Wreath Making
 - Painting on Canvas
 - Graphic Design & T-Shirt Printing
 - Sublimation Printing
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CPR & First Aid Certification Classes

- Adult CPR Certification
 - Child CPR Certification
 - Infant CPR Certification
 - First Aid Certification
 - CPR & First Aid Combination Class
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Session Preferences

Preferred Days:

- Monday Tuesday Wednesday Thursday Friday Saturday

Preferred Time:

- Morning Afternoon Evening
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Payment Information

Registration Fee Paid: Yes No

Payment Method:

- Cash Card Cash App Zelle Other: ___
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Additional Notes or Special Requests

Agreement & Signature

I understand that participation in classes and workshops is voluntary. I agree to follow all safety instructions during sessions.

Participant Signature: _____

Date: _____

Parent/Guardian Signature (if under 18): __