





## **CARTOON AND CARICATURE ART CLASS SERIES**

AT THE DICK INSTITUTE EVENT SPACE
APPLICATION FORM FOR PRIMARY PUPILS (AGE 8 TO 11)
SATURDAYS 11.45AM - 12.45PM: 6<sup>TH</sup> SEPTEMBER - 27<sup>TH</sup> SEPTEMBER

PLEASE RETURN FORM BY JULY 15TH --THIS CLASS SERIES IS FIRST COME FIRST SERVED

Participant information							
Name					Pronouns		
Address	5						]
Parent/Guardian information							
Parent/Guardian Name							
Email							
Phone							
Tell us why would you like to take part in these cartoon art classes (in two sentences minimum							
Do you require any pecial accommodations?							$\exists$
eciai accommo	odations:			Par	ticipant Signature	)	
I CONFIRM MY COMMITMENT TO ATTEND THE							
CARTOON ART CLASSES IN FULL IF SUCCESSFUL IN MY APPLICATION (NOT ACCOUNTING FOR EXTENUATING CIRCUMSTANCES).			Parent	/Guardian Signat	ure		
EXTERIOATINO OIROUMSTANCES).							