



Tuesday Workshop CANVAS PAINTING for KIDS

Kids experiment with **colorful acrylic paints** to create their own **unique paintings on canvas!**
 The young artists are taught **different techniques for painting with acrylics.**
 Workshops are offered at **both studios and themes change weekly**, so come often!

- ✓ **Tuesdays 3:45–5:00pm**
- ✓ **Just \$35 Per Session**
- ✓ **Snack Included**
- ✓ **Ages 6–12**
- ✓ **One Month of Sessions (4) – \$130**
- ✓ **Bring a Smock or Apron**
Acrylic paints are permanent and can damage clothing!



Sign Your Child Up Today!

Cleveland Park Studio (202) 363-9590

3413 Connecticut Ave, NW • Washington, D.C., 20008

Bethesda Studio (301) 654-3206

4923 Elm Street • Bethesda, MD 20814



Canvas Painting Tuesdays REGISTRATION FORM

Bethesda Studio Cleveland Park Studio Today's Date _____

AGES 6–12 • TUESDAYS, 3:45–5:00pm • OCT 2016 THRU MAY 2017 • \$35 PER SESSION OR 4 SESSIONS FOR \$130

OCT	<input type="checkbox"/> 10/4	<input type="checkbox"/> 10/11	<input type="checkbox"/> 10/18	<input type="checkbox"/> 10/25	JAN	<input type="checkbox"/> 1/3	<input type="checkbox"/> 1/10	<input type="checkbox"/> 1/17	<input type="checkbox"/> 1/24	<input type="checkbox"/> 1/31	APRIL	<input type="checkbox"/> 4/4	<input type="checkbox"/> 4/11	<input type="checkbox"/> 4/18	<input type="checkbox"/> 4/25	
NOV	<input type="checkbox"/> 11/1	<input type="checkbox"/> 11/8	<input type="checkbox"/> 11/15	<input type="checkbox"/> 11/22	<input type="checkbox"/> 11/29	FEB	<input type="checkbox"/> 2/7	<input type="checkbox"/> 2/14	<input type="checkbox"/> 2/21	<input type="checkbox"/> 2/28	MAY	<input type="checkbox"/> 5/2	<input type="checkbox"/> 5/9	<input type="checkbox"/> 5/16	<input type="checkbox"/> 5/23	<input type="checkbox"/> 5/30
DEC	<input type="checkbox"/> 12/6	<input type="checkbox"/> 12/13	<input type="checkbox"/> 12/20	<input type="checkbox"/> 12/27	MAR	<input type="checkbox"/> 3/7	<input type="checkbox"/> 3/14	<input type="checkbox"/> 3/21	<input type="checkbox"/> 3/28							

FAMILY INFORMATION

Parent/Guardian _____

Address _____

City, State, ZIP _____

Phone _____

Email _____

Child's Name _____ Age _____

Allergies/Medications: _____

METHOD OF PAYMENT

CASH CREDIT CARD

Name on Card _____

Credit Card Number _____

Security Code _____ Expiration Date _____

Billing Address ZIP Code _____ Amount Billed _____

Please have your child bring an old shirt or smock to class!

Has your child been to All Fired Up before? YES NO

Type of Event — Birthday Party, Summer Camp, Class

**Please print, complete and mail this application along with your payment to the studio your child will attend.
 Or, stop by the studio to register your child.**