Scholarship and Registration Form: “Artistic Expressions”

The Hunterdon Art Museum has a scholarship fund for adults with any disability/neurodiversity who would like to participate in its Artistic Expressions program. Artistic Expressions is designed for adults with neurodiversity, physical limitations, developmental disabilities, and/or any disabilities. Classes are created for students to experiment with many forms of art making at their own pace and skill level.

- **Enrollment & Availability:** Full scholarships are available on a first come, first-serve basis. Applications are due on January 6th for Session 1 and February 10th for Session 2.

  There are a total of 6 full scholarships available for winter Artistic Expressions.

- **Location & Facility:** Classes are held in-person on the fourth floor in either Studio A or C of the Hunterdon Art Museum.

- **Behavioral Policy:** Please be advised that in cases of non-compliant behaviors, the Museum reserves the right to remove a student from class.

- **Instructor Substitutions:** HAM reserves the right to substitute instructors of an equal caliber for any class or workshop.

I have read the Above Policies: (Signature) __________________________________________

861A Artistic Expressions with Jim Pruznick Session 1
Adults & teens 16 & up
6:30 – 8:00 p.m.
Tuition: $50
**Session 1:** 5 Thursdays: January 13, 20, 27, February 3, 10

861B Artistic Expressions with Jim Pruznick Session 2
6:30 – 8:00 p.m.
Tuition: $50
**5 Thursdays:** February 17, 24, March 3, 10, 17

*A total of 6 full scholarships (3 scholarships per session) are available for winter 2022.*

Continued on page 2
1. Student’s Name ___________________________ Date of Birth (if under 18) __________
Address ________________________________________________________________
City ___________________________________ State ________ Zip ________________
*E-mail _________________________________________________________________
Home Phone (_____) Work Phone (_____) Cell Phone (_____) __________________

2. Parent/Guardian’s Full Name __________________________________________
Address (If different from student) __________________________________________
City ___________________________________ State ________ Zip ________________
*E-mail _________________________________________________________________
Home Phone (_____) Work Phone (_____) Cell Phone (_____) __________________
*This is our primary form of communication with everyone involved with the registration; email addresses are essential.
Parents/Guardians: please list the preferred emergency contact phone number:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

We welcome students of all abilities. Making us aware of any special considerations is greatly appreciated and helps us ensure a successful class experience for all. Please list any known allergies/other conditions needing attention and/or reasonable accommodation:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
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Photo Consent: There may be opportunities and occasions for photographs to be taken of class. These images may be used for grants and funding purposes. Can we include the above names student in these photographs? Please circle: YES or NO.

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Complete this form, send to:

HUNTERDON ART MUSEUM, 7 Lower Center Street Clinton, NJ 08809 Attention: Martha Kelshaw
Email to martha@hunterdonartmuseum.org phone: 908.735.8415 ext. 119 • fax: 908.735.8416

hunterdonartmuseum.org