

STUDENT INFORMATION

- Returning Student
 New Student

All new students must first attend an orientation session prior to filling out this form.

Student First Name _____ M.I. _____ Last Name _____ Suffix (Jr, Sr, III) _____

Date of Birth (mm/dd/yyyy) _____ Age _____ School _____ Grade _____ Expected H.S. Graduation Date _____

Gender: _____ What category best describes your race? (please check one)

Male Female African American/Black Hispanic/Latino Asian/Pacific Islander White Native American/Alaskan Native

Multiethnic (please specify) _____ Other (please specify) _____

Street Address _____ CHICAGO _____ IL _____
City State Zipcode

Home Phone _____ Cell Phone _____

Email Address _____ Website _____

PARENT/GUARDIAN INFORMATION

First Name _____ M.I. _____ Last Name _____ Suffix (Jr, Sr, III) _____

Gender: _____ What category best describes your race? (please check one)

Male Female African American/Black Hispanic/Latino Asian/Pacific Islander White Native American/Alaskan Native

Multiethnic (please specify) _____ Other (please specify) _____

Home Street Address _____ City _____ State _____ Zipcode _____

Home Phone _____ Cell Phone _____ Work Phone _____

Email Address _____ Website _____

Employer's Name _____ Position _____

Work Street Address _____ City _____ State _____ Zipcode _____

Alternate Contact Name _____ Relationship to Student _____ Phone _____

How did you find out about Marwen? Friend Parent Relative Teacher Presentation by someone from Marwen Other _____

Do you take out-of-school art courses anywhere other than Marwen? Yes No If yes, where? _____

STATEMENT OF ELIGIBILITY – Registration cannot be processed unless this section is **initialed and signed by the student's parent or guardian**. For admission into Marwen's programs, the student must meet **ALL** of the following criteria. As the parent or guardian of the student named on the front of this registration form, place your initials in the box to the left of each criterion to confirm your understanding and agreement. If you have questions or concerns regarding any of the criteria please contact Marwen.

My son/daughter/charge, named above, wishes to apply for admission to Marwen and I, the undersigned, attest that they are eligible and qualify for Marwen's programs because he/she:

- lives within the city limits of Chicago
- is a student in grades 6-12
- is under-served, that is, our family cannot afford to pay for art courses elsewhere
- is capable of independently making art for a duration of up to 3 hours
- is self-electing to attend Marwen courses and actively participate in course activities

Parent/Guardian Name (please print) _____

Parent/Guardian Signature _____ Date _____

CONSENT AND RELEASE

I consent to interviews, photographs, and audio and video recordings of myself (collectively, "Personal Images"). I grant Marwen the irrevocable right to use, reproduce (whether through digital copying, photography, audio and video recordings, or any other means), release, publish, transmit, distribute, exhibit, and/or display **in any and all forms and media** (whether existing or future, and whether in whole or in part) and **in any and all manners**, including composite or distorted representations, (1) any or all of my artwork that is created at or through Marwen, (2) any or all of the Personal Images, and (3) my name and likeness. (Items (1)-(3) are the "Materials.") The preceding consents are given for **and limited to** Marwen's activities as a non-profit institution. Such activities may include, without limitation, public relations, news articles, telecasts, webcasts, press releases, education, fundraising, marketing, advertising, and research. Such activities may be performed by Marwen or any of Marwen's employees, agents, affiliates, partners, assignees, licensees, or designees.

I waive all rights to inspect or approve any uses that may be created under the preceding paragraph, or the use to which any of the Materials may be applied. I waive all claims to compensation by, through, or under Marwen for any uses that may be created under the preceding paragraph. I agree that the Personal Images and all negatives, data files, and other originals thereof shall constitute Marwen's sole property, with the full right of disposition in any manner whatsoever.

I release, discharge, and agree to hold harmless Marwen, its agents, affiliates, partners, assignees, licensees, and designees, and all persons acting under its/their permission or authority from any and all claims whatsoever in connection with the use of the Materials as described in the first paragraph above.

I certify that I either (a) am 18-years old or older and legally competent to execute this Consent and Release or (b) am under 18-years old and have the consent of my parent or guardian to execute this Consent and Release. I understand that the terms herein are contractual and not a mere recital, that this instrument is legally binding, that I have voluntarily signed this document, and that Marwen is relying on this Consent and Release to perform the activities described in the first paragraph above. I have read this Consent and Release and am fully familiar with its contents.

Student's Signature

Date

I am the parent and/or legal guardian of this student and approve the terms in this Consent and Release.

Parent/Legal Guardian's Signature

Date

Parent/Legal Guardian's Phone Number

Email Address

REGISTRATION

You may take up to **two courses** per term and unlimited workshops. Courses fill quickly so please list an alternate choice at the bottom in case your first choice is full. Courses are subject to availability. **Please do not register for courses and workshops that occur at the same time.**

Course Name (first choices)	Day of the Week	Workshops	Day of the Week
#1: _____		#1: _____	
#2: _____		#2: _____	
		#3: _____	

Alternate Choice (Please sign me up for this if my first choice is full)	Day of the Week	Workshop Alternates	Day of the Week
ALT#1		ALT#1	
ALT #2		ALT #2	
		ALT #3	

SPECIAL NEEDS AND CONSIDERATIONS

What special needs or considerations should Marwen staff know about this student prior to enrollment?

For Office Use Only

Place Labels Here