

ENROLLMENT FORM

LAST NAME _____ FIRST NAME _____ DATE OF BIRTH _____
ADDRESS _____ APT.# _____ CITY _____ STATE _____ ZIP _____
PHONE #1 (____) _____ PHONE #2 (____) _____ E-MAIL* _____

EMERGENCY CONTACT : NAME _____ PHONE (____) _____ RELATIONSHIP _____
TODAY'S DATE ____/____/____

**Please note: Email is used primarily by instructors for contacting students for course-related information. Email is also used by the School for official Glassell communications with students, such as e-newsletters; and communications from the School staff, including the Faculty Chair/Dean, Registrar, or other office personnel.*

	COURSE NUMBER	SECTION	DAY	STARTING TIME	INSTRUCTOR'S NAME	NOTES	TUITION
	1.						\$
	2.						\$
	3.						\$
	4.						\$

COURSES APPROVED BY: _____
FACULTY SIGNATURE REQUIRED

STUDENT SIGNATURE REQUIRED BELOW FOR ALL REGISTRATION FORMS.
REGISTRATION WILL NOT BE PROCESSED WITHOUT SIGNATURE.

X _____
I have read and understand all Studio School Registration and Enrollment Policies and Guidelines, as listed in the course catalog and available at the School website, and I agree that I am being charged for the amount indicated on this form, and will pay that amount in the payment method indicated to the right.

FILL IN THIS SECTION ONLY IF PAYING WITH CREDIT CARD

VISA ☐ MCARD ☐ AMEX ☐ DISCOVER ☐ CVC code _____ EXP: MN _____/YR _____

CARD NUMBER: _____

PAYMENT METHOD: CASH ☐ CHECK ☐ CREDIT ☐

Would you like to join?

A Museum of Fine Arts, Houston membership at the **Patron level (\$185)** or higher will qualify you for a 10% discount on one Studio School tuition per semester.

MFAH MEMBERSHIP DUES AT PATRON-LEVEL:

\$ _____

PAYMENT INCLUDES DONATION
TO THE GLASSELL SCHOOL OF ART \$ _____

TOTAL PAID \$ _____

ALREADY AN MFAH PATRON-LEVEL MEMBER OR HIGHER?

YES ☐ NO ☐

NAME ON MEMBERSHIP/ ID # _____