

**“Right-Brained Studio”, *the art of creative thinking*  
Registration Form**

Name (parent/guardian): \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Emergency/Cell: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Student's name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Session(s), Class, Date and Time: \_\_\_\_\_

Student's name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Session(s), Class, Date and Time: \_\_\_\_\_

Student's name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Session(s), Class, Date and Time: \_\_\_\_\_

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**Method of payment:**

**Please make checks out to Kelly D. Pelka or Right-Brained Studio and mail or drop off to:  
Kelly D. Pelka, 140 Harrison St. Unit GE Oak Park, IL 60304**

Cash amt. \_\_\_\_\_ Check # \_\_\_\_\_

**Waiver and Release**

In consideration of my attendance at or use of Right-Brained Studio facilities, I hereby assume all risks of personal injury, death, property loss or other damages that may result from or arise out of attendance at or use of or participation in any of Right-Brained Studio's programs or activities. I understand that the forgoing waiver of liability on my behalf shall apply to any and all claims against Right-Brained Studio and its officer's, directors, employees, servants, agents or affiliates ("Right-Brained Studio Affiliates") for any such personal injuries, property loss or other damages connected to or arising out of any of the aforesaid risks.

I represent to Right-Brained Studio that I am able to perform those activities which I may undertake at Right-brained Studio and that I am solely responsible for all health risks associated with such activities.

I hereby, on behalf of myself and my heirs, executors, administrators and assigns, fully and forever release and discharge Right-Brained Studio and Right-Brained Studio Affiliates, and of each of them, from any and all claims, damages, demands, rights of action, present and future, know or unknown, anticipated or unanticipated, resulting from arising out of my attendance at or use of Right-Brained Studio facilities, or my participation in any of Right-Brained Studio's activities or programs, including those which arise out of negligence of Right-Brained Studio and Right – Brained Studio Affiliates from any and all liability for any loss, or theft of, or damage to personal property.

I acknowledge that I have carefully read this Waiver and Release and fully understand that it is a waiver and release of liability. Participant's legal guardian MUST sign waivers if Participant is under 18 years of age.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_