



Ceramics Program

Office for the Arts at Harvard

224 Western Avenue | Allston | Massachusetts 02134 | T 617 495 8680 | F 617 496 9787 | ofa.fas.harvard.edu/ceramics

Harvard Employee and Greater Community Registration

Spring Term 2017 14-week term: January 30 – May 6, 2017

Registration is on a first-come, first-served basis from November 10th until classes fill. You must be 18 years or older to register. Early registration is strongly recommended as classes fill quickly.

Total registration fee and Harvard employee TAP form, if used, must be submitted with the registration form to secure the registration. Two TAP forms are required for two course enrollments. Contact panepint@fas.harvard.edu for TAP tuition information.

We cannot accept payment in cash or by credit card. To assist us in notification of acceptance, please include your e-mail address. Acceptance notification will include public transportation and parking permit information.

- Write a separate check or money order for course tuition and for workshop fees payable to **Harvard University**.
- Send or bring this registration form, a check and a TAP form, if applicable, to the studio: **Ceramics Program, 224 Western Ave., Allston, MA 02134**
- Complete the questions and liability form.
- When registration is finalized, you will be notified of acceptance by e-mail.

Course Title/ Ind. Studio (abbreviate)	Instructor	2 nd Choice, if full	Total Fee
			\$
			\$
Application fee waiver for greater community participants who bring in new greater community participants			- \$35
Total Tuition Fee			\$

Workshop	Instructor	Total Fee
		\$
		\$
Total Workshop Fee		\$

(Separate check needed)

Contact

Name (please print) _____

Address _____ City _____

State ____ Zip _____ E-mail Address _____

Telephone (day) _____ (cell) _____

Name of referral _____

Greater Community 1st time Greater Community

Harvard Employee: TAP eligible: regular Long service not TAP eligible

Harvard Affiliation: Alum Extension School Student Spouse of Harvard Employee

for studio use only: Date received _____ Check # _____ Amount \$ _____ TAP form _____

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All Ceramics Program applicants must complete this section.

Liability Release

I (name of participant) _____ realize that my participation in the Ceramics Program may involve some risk of personal injury and damage to the studio property: therefore, I assume all risks related to these activities and release Harvard, its directors, officers and employees from all resulting liability from personal injury and property damage.

Health insurance coverage: _____

I have read and freely signed this agreement, which shall take effect as a sealed instrument.

Signature _____ Date _____

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Data

All Ceramics Program applicants are asked to complete this section.

Please tell us how you learned about the Ceramics Program.

Experience

Please indicate in what ways this course is a new direction of study or is a continuation of previous interest, study, or work experience. Indicate what you hope to accomplish this term.

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Answers to the following questions are voluntary and confidential.

Gender: Female _____ Male _____ Age _____

Ethnic background _____ Citizenship _____

Current Occupation _____ Job title _____

Employer _____

College and Professional Schools Attended _____

Major _____ Degree _____ Dates _____

Send in this registration form with your payment.

Keep brochure for reference.