

Contact Information:



Student & Parent/Legal Guardian Agreement

Please return this paper by Monday, August 8th.

Students:

I have read and understand each of the safety rules set forth in this contract. I agree to follow them to ensure not only my own safety but also the safety of others in the art classroom. I also agree to follow the general rules of appropriate behavior for a classroom at all times to avoid accidents and to provide a safe learning environment for everyone. I understand that if I do not follow all the rules and safety precautions, there will be consequences and I will not be allowed to participate in hands-on activities.

Student Name (printed): _____

Student Signature: _____

Parent/Guardian,

You are responsible for ensuring a safe classroom environment. Please read the list of safety rules. No student will be permitted to perform hands-on activities unless this contract is signed by both the student and the parent/guardian and is on file with the teacher. Your signature on this contract indicates that you have read this Art Class Safety Contract, reviewed it with your child, and are aware of the measures taken to ensure the safety of your child in the classroom.

Parent/Guardian Name (printed): _____

Parent/Guardian Signature: _____

Date: _____

Parent/Guardian Contact Information:

Phone Number: _____

Email Address: _____

Emails will be used for important updates on our class, field trips, and additional Art opportunities outside of our class. If you are available for assisting with complex projects (during or after school), or your company is Art related and have field trip opportunities, would like to be a guest speaker, or donate supplies.