

# Registration



Tacoma Metal Arts Center  
3833 6th Ave.  
Tacoma, WA. 98406

Phone: 253-227-1694  
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www.TacomaMetalArts.com

Tacoma Metal Arts Center

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

Name : \_\_\_\_\_

Address : \_\_\_\_\_

City/State/Zip : \_\_\_\_\_

Phone : \_\_\_\_\_

Email Address : \_\_\_\_\_

How did you here about us?  Friend/ Family  Website  Advertisement  Other: \_\_\_\_\_

Class Title	# of Sessions	Class Dates	Price

**Total:** \_\_\_\_\_

## Payment

- Credit Card     
  Check payable to Tacoma Metal Arts Center     
  Money Order  
 Mastercard  
 Visa

**Card Number:** \_\_\_\_\_  
**Expiration Date:** \_\_\_\_\_  
**Cardholder Name:** \_\_\_\_\_  
**CVV on back of card:** \_\_\_\_\_

Read and sign below:

**Waiver:**

Assumption of Risks: Use of Tacoma Metal Arts Centers', facilities, equipment and services carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. In consideration of permission to use the facilities, equipment and services available at Tacoma Metal Arts Center I hereby waive Tacoma Metal Arts Center, its staff, volunteers and all agencies whose property and personnel are used as a part of TMAC's programs and any sponsoring of funding agencies or individuals for responsibilities of any injury, death, damage, loss, accident, delay or irregularity which may be occasioned for any reason whatsoever during the course of my participation. I hereby certify that I am physically able to participate in all the activities for which I am enrolled. TMAC assumes no responsibility for losses or additional expenses incurred.

**Cancellation Policy:**

If you cannot attend a class you have signed up for please contact Tacoma Metal Arts Center one week prior to the start date. Credit will be issued which can be used toward another class. Refunds will be made only if the class is cancelled by Tacoma Metal Arts Center.

Print Name \_\_\_\_\_

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

**Internal Use Only**

Registration Completed:	
Date:	