

REGISTRATION:

All residents will be enrolled in the order in which completed and signed applications are received by postal mail only. Registration is determined by our course offerings. It is highly recommended that you mail your registration form in **early** to avoid being closed out of a class, or having a class canceled due to low enrollment.

Unless you are otherwise notified, please assume your registration has been completed as requested. In other words, you will only be contacted if your class request cannot be honored.

Class and Registration Fees:

All 1 hour classes are \$100*. (***Chess Club requires and upcharge of \$20***). There is a \$15 registration fee per family. There will be a \$25 fee for all checks returned from the bank. Electronic payment can be accepted via Zelle @ eastwillistoncreativearts@gmail.com

Refund Policy:

There are no refunds. Late starting dates will be accepted only with full payment. Please also be advised that we do not pro-rate the classes.

Class Switching:

Class switching will be allowed (space permitting only) until the end of our second session/class, on **January 24, 2026**. No exceptions.

Scholarships:

Scholarships have been established for those children who qualify for reduced lunch. All inquiries will be kept confidential. For more information, please email us at contact@ewcreativearts.com

Snack table:

We will have snacks that can be purchased by the children, including crackers, pretzels, fruit snacks, etc. We will also have water, hot cocoa, etc. Snacks and drinks are \$1 each.

*****Heath & Saftey Procedures*****

In accordance with the EWSD protocols:

Please stay home if anyone has the following symptoms of cold or flu:

fever/chills, shortness of breath or difficulty breathing, severe cough, muscle/body aches, severe congestion or runny nose, nausea/vomiting, diarrhea. Anyone experiencing these symptoms who shows up to classes at any time must be picked up to return home.

*Your child can return to Creative Arts if fever free or has not vomited within 24 hours of attending Saturday morning classes.

We will continue to have an additional supply of sanitizers, wipes and masks on hand.

Dates

Classes will be held for 8 Saturdays for the 2025 year. Keep in mind that when the East Williston Schools are closed, there is no Creative Arts for that weekend. Please check the school calendar to confirm the dates.

January

10, 24, 31

February

7, 28

March

7, 14, 28

Contact Info

Grace Moss-Beglane (917) 859-8769

Alison Bender (917) 691-5784

Sandy Sookdar Dholakia (917) 353-4007

Vanessa Alland (917) 445-5823

Jen Lam (347) 526-5756

Lauri Testani Palmieri (516) 484-0179

Mary Ellen Testa (516)-747-1386 (Tennis Coordinator)

Tennis is offered in Spring & Fall seasons only.

Any questions, concerns or comments, please email: contact@ewcreativearts.com

Visit our website for updates and events! www.ewcreativearts.com

IMPORTANT REGISTRATION INFORMATION

Please fill in the registration application in its entirety. Two forms need to be completed: (1) Registration Form and (2) Emergency Release Form. The Registration Form and Emergency Release Form need to be mailed in at the time of the registration. **No application will be accepted unless all areas are completed and signed on the back of the registration form.** Be sure to register your child correctly. Returning students or those with outside experience should register for advanced classes. Please adhere to grade level restrictions.

- **All children must reside in the East Williston School District and be at least *5 years old* to participate in the program.**
- A disruptive/non-participating child will be removed from the class/ program.
- Photos may be taken during the program and may be used in future brochures or our website. If you do not want your children in the photos, EWCAW must be notified in writing.
- Parents are expected to pick up their children promptly. Any parent repeatedly picking up their child late may be subject to removal from the program. Please do not drop-off your child before the start of their registered class. There is NO supervision outside the registered class times.
- Lost and found items will be left with the staff.

If you don't hear from us, consider it good news!

If you sign up for a class and you don't hear from us, it means that the class will run as scheduled and that you are registered. Please come to the first session on January 7th.

WE WILL ONLY CONTACT YOU IF:

- A class will not be running
- There is a change to the schedule
- You are on a waiting list or
- There is some unusual circumstance

If you are concerned about whether or not your registration was received, please e-mail us at: **contact@ewcreativearts.com**

ALL REGISTRATIONS MUST BE POSTMARKED

REGISTRATION FORM

All contact fields are mandatory.

Family

Name: _____

Address: _____ RH OW EW M A

Phone Numbers:

Home _____ Cell _____

Email: _____

Child #1 Name: _____ Age: _____

Allergies: _____

9:00-9:55

10:00-10:55

11:00-11:55

1st Choice

2nd Choice

Child #2 Name: _____ Age: _____

Allergies: _____

9:00-9:55

10:00-10:55

11:00-11:55

1st Choice

2nd Choice

Child #3 Name: _____ Age: _____

Allergies: _____

9:00-9:55

10:00-10:55

11:00-11:55

1st Choice

2nd Choice

Number of Classes: _____ X \$100 = \$ _____

Registration Fee: \$15.00/Family

Total Class Tuition: \$ _____

Total Amount Enclosed: \$ _____

For Registrars Only Check Number: _____

Date Received: _____

Make Checks Payable to: EAST WILLISTON CREATIVE ARTS WORKSHOP

P.O. Box 29 Williston Park, NY 11596

Electronic Payment: **Zelle @ eastwillistoncreativearts@gmail.com**

IMPORTANT: SIGNATURE REQUIRED ON BACK

EMERGENCY RELEASE FORM

In case of accident or serious illness, I request EWCAW to contact me or the emergency alternate named below. If I (we) cannot be reached, I authorize EWCAW to make any necessary arrangements for the safety of my child.

In consideration of your accepting my application, the undersigned accepts complete responsibility for participating in this program, including any injuries or accidents that might occur as a result, and agrees not to assert any claim against the EWCAW, or any other person or party for same; and further releases and waives any rights or claims for heirs, executors and administrators of the undersigned which they might otherwise have against the EWCAW, as well as any other person or party connected with this program, their administrators, successors or assigns. The undersigned parent or legal guardian agrees to release and hold harmless above EWCAW person or party of any claims and/or rights which may be asserted on behalf of the participant.

Child(s) Names: _____

Home: _____

Cell: _____

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____

Date: _____

Emergency Contact Name: _____

Emergency Tel. Number(s): _____

If you do not wish to have your child's photograph on the cover of our booklet OR on our website, please send a written notice to EWCAW, PO Box 29, Williston Park, NY 11596

*EWCAW is run by **volunteer** parents from our district who donate their time and energy to ensure our children have a fun and quality experience. We would love to have you volunteer with us. If you are interested please provide your name and email and we will contact you.

Parent Volunteer Name: _____

Email: _____