



REGISTRATION + REFUND POLICY

INFORMATION

Registration for most facility-based programming is accepted at the facility holding the program.

1. All registration is accepted in person or online. Full payment is required at the time of registration by credit, check, cash or money order.
2. The deadline to register for any class is five (5) business days before the start of said class. If there are spaces available after 5 days prior to start date, staff will determine if student may register.
3. Registration is on a first-come, first served basis. When a class/activity limit is reached, a waiting list will be started. If enough interest is shown and the facilities are available, an attempt to form another class will be made.
4. Staff responsible for program registration will maintain waiting lists and contact persons on the list if space becomes available.
5. The Museum reserves the right to cancel any programs due to insufficient registration. Participants in classes canceled by the Museum will receive a full refund less any processing fee assessed by online service companies. We reserve the right to place a substitute instructor as needed.
6. There will be no registration after the class/program start date without approval from the Museum.
7. We do not prorate any programs/rentals. There is a \$40 fee for all returned checks.
8. Discounts are in place for Museum members. Other discounts may be available and will be listed in course descriptions.

Minors must be dropped off and picked up by a parent or disclosed guardian in the Museum reception area and checked in by Museum personnel. It is the responsibility of the parent or guardian of any minor child to inform the Museum, in writing, of all medical conditions, medications and/or allergies of said minor child.

The Coral Springs Museum of Art is not responsible for any artwork or personal items lost, stolen or left in the classrooms. Items left behind may be subject to disposal or donation.

REFUND POLICY

- 100% refund if the Department cancels the program or the facility rental less online processing fees when applicable. The Museum will automatically place refund on account to use later with no expiration. Request for credit card/check must be received in writing within 14 days of cancellation notice. In the event of cancellation, we will notify you by email/online registration system.

Refund requests received in writing at least 14 or more days in advance of the program/rental are entitled to:

- 100% refund or account credit based on the total cost of the program or rental less online processing fees when applicable.
- Refund requests received less than 14 days in advance of the program/rental will not be granted
- Refunds for medical circumstances requested prior to the program/rental/team placement date will be granted at 100%, pending verification.

Non-attendance/non-participation in a program does not entitle the patron to a refund.

REFUND REQUEST MUST INCLUDE AN OFFICIAL PROGRAM RECEIPT. A refund check/credit card process may take approximately 2-3 weeks.

PHOTO + LIABILITY WAIVER

I understand that the Coral Springs Museum of Art produces a range of communication and marketing efforts, which includes communication with other media outlets. With this understanding, I consent to the use of my image or that of my minor child referenced in this application for these purposes without compensation. Further, I understand that the Museum may use images of any and all students' artwork without compensation.

I hereby waive any and all rights and/or claims for damages against the Coral Springs Museum of Art that may occur. I accept all risk and do hereby release the Coral Springs Museum of Art, The City of Coral Springs, The Studio, its employees and its representatives for any and all liabilities and/or injuries during any activity. Further, I also authorize the Museum to obtain, through a physician of its own choice, any emergency medical care that may become necessary for my child as a result of an accident or sudden illness.

I, _____, the undersigned have read each of the above-mentioned Museum policies and agree to abide by them.

Print Name _____ Date _____



Withdraw or Refund Request Form

One form must be used for each request

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Participant Request

*Participant's Name: Last First

*Mailing Address: # & Street City State Zip

*Email Address: *Phone Number:
Please use the phone number used to register for the program

*Program Number: *Program Name:

If Participant is a Minor:

*Parent/Guardian Name: Last First

Reason + Request

☐ Schedule Conflict ☐ Medical ☐ Other Refund
Must include a Doctor's note to be considered for full refund *Please explain below* Credit

If you checked Program Dissatisfaction or Other, describe:

* Must be completed for withdrawal/refund to be processed

Below to be Completed by Museum Staff

Fee Paid for Program: Staff Requesting Date

Amount refunded/credit Director, Approval Date

Account to be Charged:

☐ Check - Be sure that address is complete and if a minor adult who refund is to be applied to is listed

☐ Credit Card Receipt/Confirmation # Original Date of Payment:

Approved Credit Refund

Not Approved