



Wholehearted Creative Arts Therapy PLLC

Art Therapy and Mindfulness Group

Wholehearted Creative Arts Therapy PLLC
501 E Boston Post Rd
Mamaroneck, NY 10543
Tel: 917.392.1134

YOUNG ARTIST INFORMATION

Student's name

Birthday

School

Age

PARENT INFORMATION

Parent's name

Email

Phone

Mailing address

Emergency contact name

Phone

- Please list an emergency contact other than a parent.

ART THERAPY SESSION INFORMATION

Saturday 2:00pm -3:30pm

Friday 4:30pm -6:00pm

PAYMENT INFORMATION

Make checks payable to Wholehearted Creative Arts Therapy

1 session \$40

5 Sessions \$200

10 Sessions \$350

Total tuition

Cash

Check

Visa

MasterCard

Amex

Name on credit card

Expiration date

Credit card #

Billing zip

Security code

REGISTRATION INFORMATION

Registration will be accepted on a first-come, first-served basis. No refunds 3 days before class begins. A \$25 fee will be assessed for returned checks. Complete this form and email it to: wholeheartedarttherapy@gmail.com.