



REGISTRATION FORM

Artists in the Classroom 2024-2025 School Year

COMPLETE & SUBMIT BY EMAIL TO: education@vcartscouncil.org

Please print clearly and complete entire form. For our current roster of teaching artists and course offerings, visit: vcartscouncil.org/en/programs/artists-in-the-classroom/.

Requesting Contact _____ Title _____
 Email _____ Phone (____) _____ ext. _____
 School Name _____ Principal _____
 Address _____ City _____ Zip _____
 Alternate Contact _____ Title _____
 Email _____ Phone (____) _____ ext. _____

PLEASE LIST ALL RESIDENCIES REQUESTED.

(Note that this form is not a list of requests in priority order, i.e., 1st choice, 2nd choice, etc.)

Ventura County Arts Council reserves the right to offer residencies to alternate teaching artists as needed. At least a 24-hour confirmed, emailed notice to the teaching artist is required to reschedule, postpone, or cancel a lesson. In the event that a teaching artist appears at the calendared time and a change of time/date has not been received within the previous 24 hours, the originally calendared date will be counted as a lesson.

Total Residencies Requested @ \$800 each _____

Teaching Artist _____ Program Title/Discipline _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____

Teaching Artist _____ Program Title/Discipline _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____

Teaching Artist _____ Program Title/Discipline _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____

Teaching Artist _____ Program Title/Discipline _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____

Teaching Artist _____ Program Title/Discipline _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____
 Classroom Teacher _____ Grade Level _____ Email _____ Phone (____) _____

Please make checks payable to: Ventura County Arts Council

Mail to: Ventura County Arts Council, Artists in the Classroom, 646 County Square Dr., Ste. 154, Ventura, CA 93003-0436

Teaching artists' wages depend on schools' payments. We appreciate your prompt payment!

Funding Source _____ Contact _____ Phone (____) _____
 Email _____ Mailing Address _____
 Principal Name _____ Signature _____ Date _____