

Art Club Application

Burbank Middle School

Please fill out the information below.

Write neatly please!

Full name: _____ Grade Level: _____

Homeroom Teacher: _____

Parent/Guardian Name/s: _____

Parent/Guardian Phone Number: _____

Student Contact Number: _____

Art Experience:

Allergies, medical conditions, or accommodations that club sponsors should be aware of

Instructor Contact

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