



Summer Arts Program 2026

Dates: June 3 - 26, 2026

3 Days per Week: Tuesday, Wednesday, & Thursday

3 días por semana: Martes, Miércoles & Jueves

Time: 9:00am - 12:00pm

Horario es de 9:00am - 12:00pm

Classes are held in the Center of the Arts' galleries. All children must be signed in and out of the center by a parent or guardian. Class sizes are limited; therefore advance registration is required.

Through a generous donation from a private foundation we are able to offer Summer Arts at no tuition cost. If you have any questions please feel free to contact us at 520-398-2371.

REGISTRATION FORM / FORMULARIO DE INSCRIPCION

STUDENT INFORMATION / INFORMACION DEL ESTUDIANTE

Name / Nombre: _____

Age / Edad: _____ Grade / _____ School / Escuela: _____

Address / Domicilio: _____
Street / Calle City / Ciudad State / Estado Zip / Código postal

Mailing address / Dirección postal: _____
P.O. Box City / Ciudad State / Estado Zip / Código postal

Has the student attended TCA's Summer Arts Program? Yes / Si No / No

Su hijo(a) a asistido al Programa de Artes de verano anteriormente?

The Center of the Arts welcomes children of all abilities. Making us aware of any special needs or conditions helps to ensure that your child has an exciting and memorable camp experience. *El Centro de Artes acepta niños de todos los niveles. Haciéndonos consciente de las necesidades y/o condiciones especiales ayudara a asegurar que su hijo(a) tenga una experiencia memorable del programa.*

Allergies / Alergias _____

Medications / Medicamentos _____

Other / Otro _____

PARENT/GUARDIAN INFORMATION / INFORMACION DE LOS PADRES

Name(s) / Nombre(s): _____

Email / Correo Electrónico: _____

Phone numbers / Números de teléfono: (____) _____ Home / Casa:

(____) _____ Work / Trabajo: (____) _____ Cell / Movil:

In case of an accident or serious illness, I request that I/we be contacted. I hereby give permission for emergency medical treatment. I agree to assume all costs related to such treatment. I hereby waive and release the Tubac Center of the Arts staff, teachers, and volunteers from and against all claims and medical legal costs associated from my child's program participation.

En caso de accidente o enfermedad grave, solicito que yo/nosotros o tutor seamos contactados. Doy permiso para el tratamiento médico de emergencia. Estoy de acuerdo en asumir todos los costos relacionados con dicho tratamiento de mi hijo(a). Por la presente renuncio a todas las reclamaciones hacia el personal, maestros y voluntarios del Centro de Arte en Tubac de gastos: médicos o legales que pudieran presentarse durante el programa.

Parent/ Guardian Signature: _____

Firma del padre o tutor:

Date: _____

Fecha:

Please check here if you and / or your child do not wish to be photographed for press, grants and publicity purposes.

Favor de marcar aqui si usted y/o su hijo(a) no desea ser fotografiado con fines de patrocinios y prensa.

WEEKS ATTENDING / SEMANAS DE

ASISTENCIA

Please select which weeks your student will be attending.

Week 1: June 2 - 4 *Semana*

1: Del 2 - 4 de Junio

morning 9am-12pm

Week 2: June 9 - 11

Semana 2: Del 9 - 11 de Junio

morning 9am-12pm

Week 3: June 16 - 18

Semana 3: Del 16 - 18 de Junio

morning 9am-12pm

Week 4: June 23 - 25

Semana 4: Del 23 - 25 de Junio

morning 9am-12

OPTIONAL DEMOGRAPHIC INFORMATION / INFORMACION OPCIONAL

To help support arts education programs at TCA, please answer the following questions about the student's demographics. This information is optional and will be used for grant reporting only.

Does the student qualify for free/reduced lunch? Yes / Si No / No

Su hijo(a) califica para almuerzo gratuito/parcial?

What School District does he/she attend / *A que distrito Escolar asiste su hijo(a)?* _____

What is the student 's race/ethnicity / *De que grupo etnico es su hijo(a)?* _____

SEND YOUR REGISTRATION FORM TO / ENVIAR EL FORMULARIO DE REGISTRACION A:

EMAIL TO:

operationsmanager@tubacarts.org

MAIL TO:

Summer Arts Program
Tubac Center of the Arts
PO Box 1911
Tubac, AZ 85646

HAND DELIVER TO:

Tubac Center of the Art
9 Plaza Road
Tubac, AZ 85646