

DOUGHERTYARTSSCHOOL

Youth Friend Request Form

1110 Barton Springs Road, Austin, TX 78704 Phone: 974-4040 Fax: 974-4039



This form is required to request one friend enrolled in the same camp / class to be placed in your child's group. Form must be submitted by parent/guardian of each student. A Program Specialist will contact you if there are questions or concerns with your request.

Participant Name: _____ **Age:** _____ **Birth Date:** _____

Parent/Guardian Name: _____ **Daytime Phone:** _____

Friend's name: _____ **Camp / Class:** _____ **Session / Dates:** _____

Please read and initial each line:

_____ I understand that **only one** friend request per student, per camp is allowed.

_____ I understand my request must be submitted **7 days prior** to the first day of class.

_____ I understand that the older student will always be placed in the younger student's group.

_____ I understand that this request will be considered but is not guaranteed.

Parent/Guardian Signature: _____ **Date:** _____

Approved: YES NO **Staff:** _____ **Date:** _____

If no, reason: _____

The City of Austin is committed to compliance with the Americans with Disabilities Act. Reasonable accommodations are made on an individual basis to comply with the ADA. If you require accommodations due to a disability, please notify our staff of your request seven business days prior to the beginning of your class at 974-4040.

