Encourage your child's creativity and confidence in the area's only ARTS based program.

Through hands-on experiences in theater, music, and visual arts, they'll explore their talents, build new skills, and have fun in a supportive, inspiring environment.

Gorham Arts Alliance

Arts Classes and Theater Productions

34 School Street

Gorham, ME 04038

E: gorhamarts@gmail.com

W: gorhamarts.org

Ph: 207-839-6887

School Year 2026-2027

We offer 2 sign-up options!

School Year Enrollment

Option 1: After school / Enrollment for the school year

Perks included in the monthly fee

-Transportation from Gorham Schools to the center right after school
-Guaranteed spot in art classes and/or theater productions
-Coverage Early Release & Oct/March Conference Days, Feb/April Vacation (T/W/Th)

For those enrolling for the school year we have a little of everything to bring out the creativity in your child.

Our classes/productions run in sessions

(3) nine week sessions Sept-Nov, Jan-March, April-June; (1) Holiday session December

Art/Science classes

Painting, Felting, Sewing, Cooking, Pottery….
Science experiments, Nature studies, and more

Theater classes/productions

Reader's theater, full productions, tech classes,
beginner dance/movement
(those enrolling for the school year are guaranteed a spot in the production)

- -

Just Theater Productions

Option 2: Theater Production Only

Optional Add-ons / à la carte (for an additional fee)

-Spot in classes/theater productions (Please note that most productions have a max of 30 participants, so if you are on the waitlist, you may not get a spot)

+Transportation from Gorham Schools to the center

+Coverage on Early Release Days, No School Day, and Feb/April Vacation

TUITION OPTIONS

Please review the tuition options below to select the best fit for your child's participation.

Option 1: School Year Enrollment Sept-June

Need after-school options? Participants who are enrolled for the school year receive:

- Transportation from your child's Gorham School to the center -no additional fee
- Guaranteed spot in our productions/classes
- Early Release Days, Oct/March Conference Days, Feb/April (T/W/Th) are included

Grades K-8 2:30pm- 5:30pm (Middle School) 3:00-5:30 (Elementary School)	**5 days** ($485/mth)	**4 days** $450/mth	**3 days** $386/mth	**2 days** $295/mth

*Art classes run in 9-week sessions. Sept-Nov, Jan-March, April-June, with a different class option each day. (Ex: Monday might be painting; TuesdayFelting: Wednesday Puppetry, etc. The schedule will be created before each session.

***Theater production rehearsals are T/W/Th, for those in grades 2-8. If you sign up for only 1 or 2 of those days, and your child wants to participate, your child will most likely have an ensemble role.

****Mondays & Fridays will include non-performance-based art classes

Option 2: Theater Production Only Gr. 2-8

Production	Rehearsal Dates T/W/TH	Time	Performances	Tuition
Adam's Family, Kids	Sept 8th-Nov 12th (10 weeks)	4:00-5:30	Nov 13 (Fri) 7:00pm Nov 14 (Sat) 12:00pm & 4:00pm Nov 15 (Sun) 1:00pm & 5:00pm	$395
Little Mermaid, Jr.	Jan 5th-March 18th (10 weeks)	4:00-5:30	March 19 (Fri) 7:00pm March 20 (Sat) 12:00pm & 4:00pm March 21 (Sun) 1:00pm & 5:00pm	$395
Willie Wonka, Kids	March 30th-June 10th (10 weeks)	4:00-5:30	June 11 (Fri) 7:00pm June 12 (Sat) 12:00pm & 4:00pm June 13 (Sun) 1:00pm & 5:00pm	$395

Option 2 Optional Add ons:

- **Transportation from your student's Gorham School to the center**
  + $10.00/day (payable to Gorham Arts Alliance-this is to cover the cost of extra staff to be within DHHS ratio)
  - This must be the same day(s) each week (Tues/ Wed &/or Thurs)
  - Parents are responsible for contacting their child's school and Gorham transportation to notify/arrange.
- **Early Release Days-Wednesday**
  +$40/day
- **No School-Inservice/Conference Days; Feb and April Vacation Days (Tue/Wed/Thurs)**
  +$60/day

How do I join in the Fun?

Please make sure you complete the following

- ➔ **Choose** a Tuition Option (School Year Enrollment **OR** Theater Production-Only)
- ➔ **What Days** your child is attending for the School Year Enrollment Option
- ➔ **Select** Any Add-Ons for Theater Production Only
- ➔ **Complete:**
  - ◆ How Do I Sign Up? (pg 5)
  - ◆ Registration Form (Pg 6)
  - ◆ Parent Contact (Pg 7)
- ➔ **Payment:**
  - School Year Enrollment : Once we receive your paperwork, we will send you a payment link.
  - Theater Production Only: (with optional add-ons) sign up will be open June 15, 2026 through our Zeffy-online registration platform. We will send you a notification once it is open.
    (If interested in our other productions, we will send out the registration link at a later time.)
- ➔ **Submit** paperwork (pages 4, 5, 6)
  - ◆ Email or scan paperwork to gorhamarts@gmail.com
  - ◆ Mail or Drop off at GAA 34 School St. Gorham, ME 04038

How Do I Sign Up?

Child's Name: _____

Participation: Please complete the boxes below

☐ **Option 1: School Year Enrollment for the 2026/27**

$25 non-refundable registration fee for returning families; $50 for new families

5 days	4 days	3 days	2 days	
M - F (circle)	M TU W TH F (circle)	M TU W TH F (circle)	M TU W TH F (circle)	

☐ **Option 2: Theater Production Only**

Transportation:

☐ **NO:** My child **will not** need transportation by Gorham Schools to the center

☐ **YES:** My child **WILL** need transportation (at $10/day) by Gorham Schools to the center on the following days:

M TU W TH F (circle)

Gorham Schools Early Release Day:

☐ **NO:** My student **will not** be attending early release days

☐ **YES:** My child **WILL** be attending early release days *(included in school year enrollment/ additional fee for those just in theater productions $40/day)*

Gorham Schools No School/Inservice/Conference Days:

☐ October 23, 2026 *(included in school year enrollment/ additional fee for those just in productions $60/day)*

☐ March 19, 2027 *(included in school year enrollment/ additional fee for those just in productions $60/day)*

Feb and April Vacation Days (additional fee $60/day if signed up for **theater production only**)

☐ **Feb Vacation** *(please circle days needed (T / W / Th)*

☐ **April Vacation** *(please circle days needed (T / W / Th)*

Days the center is closed

Sept 7: Labor Day
Oct 9: Inservice Day
Oct 12: Indigenous Persons Day

Nov. 3 Voting Day
Nov. 11 Veteran's Day
Nov 25-27 (Thanksgiving break)
December 23-January 1 (Holiday Break)

January 18 MLK Day
February 15 (M) & 20 (F)
April 19 (M) & 23 (F)
May 25 Memorial Day

Gorham Arts Alliance: Registration Form

Print clearly, please. **Complete all fields. One per child.**

***Child's Name:** _____ DOB: ____/____/_____

Grade:_____ School Attending: _____

Primary Home Address: _____

***Custodial Parent/Guardian #1:**_____

Phone # (Home) _____ (Cell #) _____

Place of Work: _____(Work #) _____

E-mail: _____

***Custodial Parent/Guardian #2:**_____

Phone # (Home) _____ (Cell #) _____

Place of Work: _____(Work #) _____

***Emergency Contact #1, other than parent,** to contact in case of emergency who is authorized to pick up:

1) Name: _____ Relationship: _____

Phone # (Home) _____ (Cell #) _____ (Work #) _____

***Emergency Contact #2, other than parent,** to contact in case of emergency who is authorized to pick up:

2) Name: _____ Relationship: _____

Phone # (Home) _____ (Cell #) _____ (Work #) _____

***Known Conditions:** *To ensure that your child has the best experience possible, please list all special needs (including medications, insulin, epi-pens), known medical conditions, physical limitations, risky behavior, dietary, animal or other allergies, etc:*

_____

_____

***Emergency Medical Treatment** - In case of emergency, sudden illness or accident, I hereby give authorization to the Director, or her appointed representative to obtain emergency medical treatment.

***Primary Care Physician:** _____

Name of Practice: _____ Phone: _____

***Dentist:** _____

Name of Practice: _____ Phone: _____

***Preferred Hospital:** _____

Parent's Signature _____ **Date:** _____ **School Year**_____/_____ **Directors' Initials**_____

Gorham Arts Alliance: Parent Contract

Child's Name: _____ School Year _____

Field Trip and Off-site Permissions: (please initial)

_____ USM grounds across the street from the Gorham Arts Alliance Center on 34 School Street.

Media Release: (please initial)

_____ I give permission to take pictures and/or video of my child and/or their programs and understand that they may appear in the seesaw app or future promotional materials, the GAA website, or on GAA social media platforms. Participants will not be named in materials without special consent.

I,_____(parent/guardian) acknowledge that I have read the Gorham Arts Alliance Parent Handbook and will abide by those policies therein.

• I will pay the monthly tuition by the 1st day of the month regardless of holidays, illness, vacations, or other absence as outlined on Pg. 6 of Parent Handbook.
• I will inform the Director(s) and/or lead teachers if someone other than their parents will pick up my child(ren).
• I will report any change in my or other emergency contact information to the Director.
• I will make arrangements for my child(ren) should weather or other emergencies result in cancellation/early closure of the center.
• I will inform the center in advance if my child(ren) will not be attending or if I cannot pick up/drop off my child(ren) by the scheduled time. If I am late, I will call the centers. I will also pay a late fee ($5.00 per minute) as outlined on Pg. 8 in the Parent Handbook.
• I will inform the Director at least 60 days in advance before removing my child(ren) from their program.
• I understand that my child cannot attend the program until any relevant documents of medical necessity (i.e.doctor medical action plan for epi-pen, or other medication, allergy plan and/or authorization to dispense medication as outlined on Pg. 13 of Parent handbook has been received and reviewed by the administration.
• I understand that my child cannot attend the program until 24 hrs after symptoms of illness (ie. fever of 100° or higher, vomiting, diarrhea, etc.) have subsided. Alternately, I understand that my child will need to be picked up within 30 min. if my child presents symptoms while attending a program.
• Program staff will call EMS if emergency medical care is needed and make every effort to inform parents as quickly as possible.
• I understand the Discipline Procedure and Zero Tolerance Policy (described below) and outlined on pg.15 of the Parent Handbook.

Please read the following Code of Conduct (Please make time to discuss this with your child/ren)

____ I will listen to and follow the instructions of my teachers.
____ I will stay within sight and sound of my teachers. I will not wander from the group.
____ I will participate in all activities with respect for myself and others.
____ I will use gentle hands.
____ I will use respectful language and make safe choices.

Discipline Procedure as follows:

1. Verbal Warning: The first incident will be documented and parents notified at pick up.

2. Loss of participation: After a second offense, another verbal warning will be given and the student may be removed from activities. Parents will be contacted immediately and may be asked to pick up their child.

3. Suspension: After the third offense, the student will be sent home immediately and given a possible suspension for the remainder of the session or production.

Zero Tolerance: Students may be removed from the program for inappropriate and/or derogatory language, inappropriate physical contact or touching, or disrespect of people or property (See pg. 15 of Parent Handbook of Policies and Procedures).

Release from Liability: The undersigned hereby expressly releases and holds harmless the Gorham Arts Alliance, its agents, owners, and employees from and against any and all claims, suits, actions, and damages arising out of, connected with or resulting from my child's participation in these programs. Further, I understand that there are inherent risks in participating in these programs, and I accept responsibility to provide accident insurance for my child, including ambulance transportation if necessary.

Parent's Signature _____ **Date:** _____

School Year_____/_____ **Directors' Initials**____