



REDDING SCHOOL OF ARTS
WHERE EDUCATION AND THE ARTS CONNECT

Parent Vendor Request Form

Student Name: _____ Grade: _____

Phone Number: _____ RSA Teacher: _____

Vendor Information: (complete ALL information below)

Vendor Name: _____

Class Description: _____

Rate per Lesson/Membership: _____

Total number of sessions per month: _____

Total amount requested*(rate per lesson x sessions per month): _____

****Cannot exceed allotted monthly threshold*

Additional 1x Fees: _____ Description: _____

Course is on-going (Aug-May)

Course is seasonal (list duration period start/end dates):

Required Signatures (Parent/Vendor/Teacher):

By signing this request form, the parent/guardian agrees to and acknowledges the following:

1. I understand that a pre-approved Parent Vendor Request form must be on file with RSA's Business Office PRIOR to engaging in any vendor service. I understand that a new form is required if changes to a pre-existing authorized service is requested. All unauthorized services are the sole responsibility of the family.
2. I understand that an authorized Parent Request Form is only good for the duration of the current school year (Aug – May), unless the course is seasonal. Families are required to complete new paperwork each year.
3. I understand that I must report my intent to drop a class and/or vendor to my teacher of record ASAP, but no later than 5 days from my last attendance date, otherwise I will be responsible for any charges incurred on behalf of RSA.

Parent Signature: _____ Date: _____

Vendor Signature: _____ Date: _____

RSA Teacher Signature: _____ Date: _____