

Central Sierra Arts Council's 8th Annual Summer ARTS Camp

Held in Columbia State Historic Park
with support from Columbia State Historic Park Rangers & The Columbia Merchants

June 20 to June 24, 2011

\$115 per child. \$105 for siblings.

EARLY REGISTRATION DISCOUNT!

\$100 per child if registration is paid in full and received
at CSAC by April 30, 2011

All fees include all art supplies, daily snack and a Camp T-Shirt!



For Ages 7 through 12 9am to Noon Each Day

Join us for a special ARTS CELEBRATION on Friday, hosted by The Columbia Merchants

"Art is the 4th 'R.' The arts plays an important role in the healthy development of self-esteem, confidence and academic performance. CSAC's Summer ARTS Camp is designed to partner children with professional artists and performers as their teachers. Students can explore their creative self-expression and appreciation of the arts. We strive to make it inspiring and insightful for the students, as well as their parents..AND it is FUN!"

~Betsy Spring, CSAC's Summer ARTS Camp Director & Arts Educator

Registration Form...

Please make checks payable to "Central Sierra Arts Council" In Memo: Summer ARTS Camp

Mail or drop off completed form and payment to

Central Sierra Arts Council, 193 S. Washington St., Sonora, CA 95370

(209)532-ARTS/2787 email: info@centralsierraarts.org FOR CREDIT CARD PAYMENT CALL CSAC

Registrant's Information:

Student's name: _____ (PRINT CLEARLY) CIRCLE: Boy Girl

Age _____ School _____

Please circle T-Shirt Size:

YOUTH-MEDIUM YOUTH-LARGE ADULT-SMALL ADULT-MEDIUM ADULT-LARGE

Parent/guardian's name: _____ (PRINT CLEARLY)

EMAIL: _____

Address: _____ City _____ Zip _____

BEST phone: _____ Work phone: _____ Alternate phone _____

**PARENT/GUARDIAN AUTHORIZATION FOR CHILD TO ATTEND
CSAC'S 8th Annual Summer ARTS Camp 2011**

I, as parent/guardian, hereby assume all the risks and hazards incidental to the conduct of activities and transportation during Central Sierra Arts Council's Summer ARTS Camp 2011. I release, absolve, and indemnify Central Arts Council and California State Parks, their contractors, volunteers and/or sponsors from all risks and hazards associated with the camp, and in the event of injury, do expressly waive all claims against them. I understand that no insurance coverage is provided by CSAC or CSP.

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

PHOTO RELEASE:

Central Sierra Arts Council requests permission to use pictures and/or video clips from CSAC's Summer ARTS Camp for organizational publicity, newspaper articles, CSAC website postings and for organizational reports. In addition, photos may be sent to the California Arts Council, who partners with Central Sierra Arts Council.

Yes! I give permission for my child to be photographed or filmed for publicity purposes. *Parent Initials:* _____

Health & Safety at CSAC's Summer ARTS Camp 2011

EMERGENCY MEDICAL INFORMATION:

In the event of an emergency, contact in this order:

1. Who to call first: _____ **Immediate Contact Number:** _____

2. Who to call next: _____ **Immediate Contact Number:** _____

3. Who to call next: _____ **Immediate Contact Number:** _____

Doctor's Name: _____ Phone Number: _____

Is registrant covered by health insurance? Yes No

Insurance Company: _____ Policy Number: _____

Does your child have allergies? If so, list:

Any medical conditions we need to be aware of?

TRANSPORTATION-CHILDREN MUST BE SIGNED OUT BY A DESIGNATED PARTY:

Who will usually pick up your child? _____ **Cell Phone:** _____

The following persons ALSO have permission to pick up and sign out my child from camp:

1. Name & Relationship _____ Cell Phone: _____

2. Name & Relationship _____ Cell Phone: _____

3. Name & Relationship _____ Cell Phone: _____

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