Saturday Art Workshop 2023 Registration

Greetings Saturday Art Workshop participants! Spring 2023 CCSU Saturday Art Workshop will begin on March 11, 2023 and end on May 6, 2023 for students in grades K-12. We strongly advise registering early to secure a spot!

 **This form and payment are due in the CCSU Art Office in Maloney Hall by February 1— Art Department, 1615 Stanley Street, PO** **Box 4010, New Britain, CT 06050 — checks payable to CCSU Art Department SAW.** The first session is on Saturday, March 11. *Classes will begin at 9:30 am. and end at 11:00 am. each Saturday*. *Please note, however, that* ***there will be no class on March 18th and April 8th as the university is closed for Spring break and Good Friday Holiday weekend.*****Also note that we cannot accept requests for specific students to be in classes together. In addition, there are no refunds for missed classes.** Fees for the entire Saturday Art Workshop are $50.00 per student (each additional sibling is $40.00). The art exhibition and reception for the Saturday Art Workshop will occur onMay 6, 2023 from 11:00 am to noon immediately following our regularly scheduled final class. Parents and students may collect their works of art no earlier than 11:45 am on that day, and all other works must be picked up in room 148 in Maloney Hall by May 15th. If you have any questions, please call the Art Department at 860-832-2620 or email us at saw@ccsu.edu.

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age on 3/31/23 \_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List any known allergies/medical conditions that we should be aware of:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_List at least two Emergency contacts:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_\_\_

Please print ANY and ALL names (**including your name)** of the adults authorized to pick up student at the end of the Saturday Art Workshop: (Please continue if more than three names on the back of this registration form)

**NAME:**  **NUMBER:**

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I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, grant permission to CCSU Saturday Art Workshop’s director and students to photograph my student participating in this program. Photographs may be used in research, academic publications, displays and/or student portfolios.