

# 1st Annual Edgewood Academy Art Camp

Dates: Monday, July 9, 2018—Wednesday, July 11, 2018

Time: From 1:00 pm—4:00 pm

Location: Edgewood Academy Art Room

## **CAMP INSTRUCTOR:**

Rebecca Thornton— Edgewood Academy Art Teacher

## **CAMP INFORMATION:**

Cost—\$75.00

For incoming grades 3-6

Snacks provided each day

Camp t-shirt for each participant

Get ready to enjoy art inside & out! We will be painting, making crafts, participating in outside art activities and making tasty treats to eat. Guaranteed to be messy and maybe even a little wet. Wear play clothes so we can have some creative fun!

**\*\*\*If coming from science camp, please bring a sack lunch\*\*\***

Please pre-register or RSVP prior to camp. For your convenience, payment may be submitted prior to camp or the 1st morning of camp.

Sign-up information:

Contact: Mrs. Rebecca Thornton

Phone: 334-399-3034

Make checks payable to Edgewood Academy



**CAMPER INFORMATION**

**NAME:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **SHIRT SIZE: (YOUTH OR ADULT):** \_\_\_\_\_

**ADDRESS:**

\_\_\_\_\_

**GRADE:** \_\_\_\_\_ **SCHOOL ATTENDING:** \_\_\_\_\_

**PARENTS NAME:** \_\_\_\_\_ **PHONE NUMBER:** \_\_\_\_\_

**PARENTS EMAIL:** \_\_\_\_\_

**RELEASE, WAIVER OF LIABILITY AND COVENANT NOT TO SUE**

For and in consideration of the 2018 Edgewood Academy Youth Art Camp arranging for my child \_\_\_\_\_, to participate in the 2018 Edgewood Academy Youth Art Camp during the week of July 9-11, 2018. I hereby release and covenant not to sue Edgewood Academy, the employees, officers, members, and agents of each for all claims, demands, rights, and causes of action of whatever kind or nature, including but not limited to, negligence, arising from and by reason of any and all, known and unknown, foreseen and unforeseen, bodily and personal injuries, damage to property, and the consequences thereof, including death, resulting from my child's participation in or in any way connected with the aforementioned camp.

I understand that it is my responsibility to evaluate the condition of my child's health in relation to the demands of this camp. If uncertain, I will consult with a family physician. Further, I understand that Edgewood Academy does not provide health insurance for camp participants and that I am responsible for obtaining adequate insurance for the eventuality of any injury or illness to my child as a result of this camp.

I hereby certify that I am the parent or legal guardian of \_\_\_\_\_, and suffering under no legal disabilities, and that I have read the above carefully before signing.

**IN WITNESS WHEREOF, I have hereunto set my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_ 2018.**

**Parent Signature** \_\_\_\_\_

**Participants Name** \_\_\_\_\_

**Emergency Contact** \_\_\_\_\_

**Emergency Contact** \_\_\_\_\_