

KEENE SCHOOL DISTRICT SUMMER ART CAMP FOR ELEMENTARY STUDENTS

REGISTRATION DEADLINE: JUNE 2, 2009

Keene Community Education will be offering the following summer camp for elementary students:

ART CAMP AT SYMONDS *with John Bass, Teacher and Artist*

Art camp is for children ages 6-12 who wish to have fun exploring different techniques in drawing, painting, collage and sculpture. Students work developing their artistic skills while creating personal works of art. Mr. Bass is a certified Art Teacher at Symonds Elementary School and is known for the positive environment he is able to create for children. Snack time (bring your own) and a short recess are a part of each morning. Each week will culminate with a Friday art show for families and friends, with refreshments at noon. Every Session features a different set of unique art experiences so students can register for one, two, or all three weeks. Each class is limited to 14 students.

SESSION I - July 13th - 17th SESSION II - July 20th - 24th SESSION III - July 27th - 31st

TIME: 8:30 - 12:30 p.m. (Mon. - Fri.) COST: \$161 each session

NOTE: Students must be picked up promptly at the end of each class.
Supervision will not be available after class time.

To reserve a place, please complete the application below and return it to Community Education with **full payment**. Questions should be directed to Community Education (357-0088). **Registration deadline: June 2**

NOTE: Student is automatically enrolled upon receipt of your payment unless notified to the contrary.

REFUND POLICY: Full refunds will be issued if the class is cancelled due to insufficient enrollment or if a request is made before 3:00 p.m. on June 2. Refund checks will be mailed from the Community Education Office. A \$10.00 cancellation charge will be assessed for all refunds except in the case where the class has been cancelled by Community Education.

2009 ART CAMP AT SYMONDS - ELEMENTARY STUDENTS

STUDENT NAME: _____ AGE: _____

PARENT/GUARDIAN NAME : _____

ADDRESS: _____ CITY/STATE : _____ ZIP: _____

HOME PHONE: _____ WORK PHONE: _____

SESSION I - July 13th to July 17th SESSION II - July 20th to July 24th
 SESSION III - July 27th to July 31st

Class fee is \$161 for each session Total Amount Due: \$ _____

Full payment must accompany registration form. Please make checks payable to: **KEENE SCHOOL DISTRICT** and mail to: **Community Education, 438 Washington St., Keene, NH 03431.**

Charge \$ _____ to my _____ Mastercard _____ VISA

Card Number: _____ Exp. Date: _____

*Card ID # _____ Cardholder Signature _____

*Last 3 digits of number found within the signature box on the back of your card.