Our winter break Art Day School for children 7–13 runs this year from February 19 to 23. Art Day School offers exciting projects, high quality instructors and the integration of MAG exhibits into the program. Children are closely supervised and given two snacks daily. Art Day School provides the teachers, materials, time and the inspiration kids need to create art.

Each day at Art Day School we’ll explore different painting, drawing, fiber, and sculptural materials. Each project will be finished the day it is started. Sign up for one day, or as many as you like.

ART DAY SCHOOL CREATIVITY CAMP
All students will have both classes

Monday February 19:
Manga with Warren Mianecke
& Polymer Clay Sculpture with Jody Selin

Tuesday February 20:
The Comic Page with Warren Mianecke & Polymer Clay Sculpture with Peggy LaHair-Edmunds

Wednesday February 21:
Drawing Ideas in and out of the Gallery with Gina Zanolli & Sculpture with Warren Mianecke

Thursday February 22:
Paint Explorers with Bella Weidman & Puppets with Paulette Davis

Friday February 23:
Portraits in Pencil and Paint with Lindsay Caruthers & Felting for Kids with Mimi Smith

Your child’s safety is of paramount importance to us. We ask that you escort your child into the Workshop in the morning and sign him/her in. At the end of the day, please come in and sign him/her out. If you want any other person, including a spouse, to have permission to pick up your child, please list them below.

Name:________________________________________  phone______________ relationship to child_____________

Name_________________________________________ phone______________ relationship ___________________

Name_________________________________________ phone______________ relationship ___________________

Please note: Behavior problems deemed sufficiently disruptive will result in a child’s removal from the program. No refunds are made in these cases.
In case of accident or illness requiring attention we will try to contact you, however, we also need the following information.

Child’s physician_______________________  Phone ________________________________

Insurance Plan_________________________ Policy Number___________________________

Subscriber Name______________________ Hospital Preference________________________

Please tell us anything else we should know to help take care of your child. For example, does your child have any allergies or special needs? Our awareness of these needs will help us make Art Day School more enjoyable and positive for your child.

Will your child be taking medication while at the Workshop? Yes ________ No _______

If yes, please read and sign the medical waiver in the gray box below.

Medication Waiver: My child,______________________________needs__________________________ (medication) administered at ____________ o’clock each day. I acknowledge that the Memorial Art Gallery is administering this medication in order to accommodate my child’s medical condition and solely as a result of my request. Further, I understand that the administration will not be performed by trained medical personnel and I assume any and all risks whatsoever.

*Parent’s Signature:________________________________________________
*Parent’s Name:__________________________________________________