

SUMMER of Art

Peace Love Fun! SAAC 2018

MORE INFORMATION

Call 870-862-5474
or www.saac-arts.org



TO REGISTER

Return Completed Form Signed by a Parent with Payment to SAAC at 110 East 5th Street, El Dorado, AR 71730

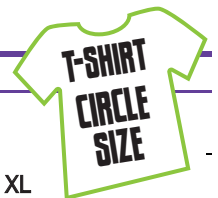
Make checks payable to SAAC. Class fees are non-refundable.

Class sizes are limited and will be filled on a first come basis.

Scholarships Available provided by SHARE Foundation and Union County Community Foundation

SAAC members and their out of town guests are eligible for the discounted camp rate.

Camp fees for new and renewing students include a \$20 student membership which is good for discounts on classes and programing for one full year at SAAC.



JUNE 4-8 • BALLET CAMP Adventures in Wonderland Stephanie Lowrey, Melissa Spears

Grade 1-4 12:30-5:30pm Mon-Fri • Performance 6pm Fri **\$130/150**

Grade 5-12 11am-5:30pm Mon-Fri • Performance 6pm Fri **\$140/160**

JUNE 11-15 • ART CAMP Extra Sm, Extra Lg, Extra Fun Mike Means, Maria & Jorge Villegas

Grade 1-8 8am-Noon Mon-Fri **\$110/130**

Grade 1-8 1-5pm Mon-Fri **\$110/130**

JUNE 18-22 • MOVIE CAMP 1 Adventure is Out There! Mike Means

Grade 4-6 1-5pm Mon-Fri **\$110/130**

JUNE 25-29 • MOVIE CAMP 2 Short Films Start to Finish David Fort

Grade 7-12 1-5pm Mon-Fri **\$110/130**

JUNE 25-29 • GLEE CAMP All the Way OFF Broadway Amy Allen, Josie Denson

Grade 1-6 8am-Noon Mon-Fri • Performance 6pm Fri **\$110/130**

Grade 7-12 1-5pm Mon-Fri • Performance 6pm Fri **\$110/130**

JULY 23-27 • THEATRE CAMP Honk, Jr. Gary Hall & Company

Grade 2-5 8am-Noon Mon-Fri • Performance 6pm Fri **\$110/130**

Grade 6-9 1-5pm Mon-Fri • Performance 6pm Fri **\$110/130**

Camp Orientation
Sat, July 14
10am-Noon

STUDENT INFO • MEMBER or OUT OF TOWN GUEST NEW or RENEWING (One Year Student Membership \$20)

NAME			Youth: S M L			
GRADE ENTERING	AGE	BIRTHDAY	Adult: S M L XL			

Any allergies or special needs?
If so, please let us know.

PARENT INFO • MUST INCLUDE WORKING EMAIL OR CELL NUMBER TO CONTACT A PARENT

MOM'S NAME	CELL PHONE
MOM'S EMAIL	DAYTIME PHONE
DAD'S NAME	CELL PHONE
DAD'S EMAIL	DAYTIME PHONE
ADDRESS	HOME PHONE
CITY, ST, ZIP	

EMERGENCY CONTACT • MUST LIST SOMEONE OTHER THAN THE PARENTS

NAME	DAYTIME PHONE
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SAAC reserves the right to drop registrants from class for: A. excessive lateness and/or absence B. disruptive behavior C. non-payment of tuition or other charges. In the event of an accident or illness, I will be notified immediately. If I cannot be reached, I hereby designate the person listed above as the emergency contact as the person to be contacted.

PHOTO WAIVER - I give permission to the SAAC to photograph or film my family, and use our likeness in publications created by SAAC or its affiliates. I understand that all images become the property of SAAC. I agree that this material may be published in, but is not limited to, education textbooks (including electronic versions), supplemental products, company websites, social media and advertising materials and I understand there will be no compensation. I grant the SAAC permission to edit content where necessary without review.

LIABILITY WAIVER - I understand that I hereby waive and release the South Arkansas Arts Center (SAAC), an Arkansas non-profit organization, of any and all claims, including personal injury claims, or cause action of any kind arising out of membership, activity or association with SAAC except those claims specifically covered by insurance provided by SAAC, and then only to the extent of such insurance coverage. I further understand that SAAC is not responsible for any articles lost or stolen during participation in SAAC productions or activities.

Signature

(Parent must sign if child is under 18)

Date