



1133 Grant Avenue, Novato CA 94945 415.596.5546 www.studio4art.net

## Summer Camp Form

Name of Student \_\_\_\_\_

Day(s)/Week \_\_\_\_\_ Age: \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

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

Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

## Areas of Interest

Clay: Handbuilding \_\_\_\_\_ Throwing \_\_\_\_\_ Sculpture (figurines) \_\_\_\_\_ Sculpture (free form) \_\_\_\_\_

Painting: Acrylic \_\_\_\_\_ Watercolor \_\_\_\_\_

Drawing: Oil Pastels \_\_\_\_\_ Chalk Pastels \_\_\_\_\_ Colored Pencil \_\_\_\_\_ Cartooning Markers \_\_\_\_\_

Printmaking \_\_\_\_\_ Sewing \_\_\_\_\_ Mosaics \_\_\_\_\_

## Any Special Instructions:

date: \_\_\_\_\_

Total Amount Received \$ \_\_\_\_\_ date \_\_\_\_\_ check # \_\_\_\_\_

Card information \_\_\_\_\_ Ex: \_\_\_\_\_