Summer Art Program - June 2023



Central Brevard Art Association
June 5th – June 30th

OFFICE: Total Paid \$_____check #

103 Barton Blvd, Rockledge 32955 \$300.00 Cost Per Child for a two-week session

Make checks payable to CBAA

Morning Sessions (9-Noon): Ages 6-10 yrs. / Afternoon Sessions (12:30-3:30): ages 11-15

TELL YOUR FRIENDS! In the two-weeks we will explore painting using images from the John Webb telescope as inspiration as well as examples from master artists. Classes will include instruction using the elements of art and the principles of design. Within the two weeks students will have 2-D and 3-D experiences such as various forms of printmaking, drawing outside, weaving, air dry clay, origami,...etc. In addition, the afternoon students will experience, pallet knife painting and drawing with the HB pencils to show value. All supplies will be provided. Students should bring a snack and drink as the day gets long. No water or sodas will be provided. Prompt arrival and dismissal is encouraged, a late fee of \$20 will be charged for any student not picked up one half-hour after dismissal. Hand wipes will be available.

ENROLLMENT IS LIMITED PLEASE REGISTER ASAP. To guarantee a seat - registrations are due two weeks prior to start date. Walk - ins welcome, in either session, if room is available. The Fridays ending <u>each two-week session</u> will be shortened to enable a *Fantastic Student Show* for each group. Most artwork will be held for the shows and all work is to be taken home on the second Friday. Instructor, Peggy Nolan, BA, M.Ed, M.EdS., individual "project" teachers Mrs. Lisa Byl and Mrs. Jackie Bishop, BMed, along with assistants in each class. These are teachers with elementary, secondary, and summer program experience. For information contact Peggy at <u>artmomnolan@msn.com</u>, the registration form is available online at <u>www.cbaaartists.com</u>. Peggy's cell: 321-544-5990 Please fill in (print) the registration form below /mail or drop off at CBAA. Please print "summer art" on the envelope. Early registration is encouraged.

Mark which session(s): Sessi	on 1: June 5 th - June 16 th	Sess	ion 2: June 19 th – Ju	ne 30 th
Student's Name		Age	School	
Additional Sibling		Age	School	
Address		City		Zip
Phone (home)	Work		Cell	
Parent's Name	email:			
I give permission for my chil	d/children to be photogra	phed for public	city purposes: Yes	No
Parent's Signature				
How did you hear about us?				