

Summer Art at Queen of Peace



One full week of
creativity!

June 15-19

12:30 – 3:00 PM

Paint
Charcoal
Clay
Sculpture
Pastels

Artists, boys or girls
Ages 10-17 welcome
All supplies provided

Instructor: Mrs. Linda Vorderer, Queen of Peace art teacher

MAT from the Art Institute of Chicago

Cost: \$100.00

Where: Queen of Peace High School, 7659 S. Linder, Burbank, IL 60459

Questions: Contact the office at 708-458-7600, or email Mrs. Vorderer at:
vordererl@queenofpeacehs.org



Application to Summer Art Camp

Student Name _____

Age of student on June 15 _____

School attending in the fall _____

Student Address _____

City _____ Zip _____

Home Phone _____ Parent Cell _____

Parent work phone _____

Parent email _____

Best time and method to reach parent _____

Please provide any additional information you would like us to know: _____

Cost: \$100.00

\$50.00 deposit and application due no later than April 30

\$50.00 balance due by May 15

Please make checks out to Queen of Peace High School

Late registrations, as space allows, require a cash payment for the full balance.

Please note: A minimum number of enrollees will determine if the camp will take place. Don't delay!

PERMISSION FORM WITH INDEMNIFICATION/HOLD HARMLESS AGREEMENT

I/We the parent(s)/guardian(s) of _____, a current student in good standing at _____ School, hereby consent to participation by my/our child in the Summer Art Camp June 15-19, 2009 at Queen of Peace High School. I/We understand that my/our child’s participation in this camp is not mandatory. Queen of Peace will not admit my child to this camp unless this permission and indemnification/hold harmless agreement is completed and returned to Queen of Peace prior to the first day of camp. In consideration for Queen of Peace allowing my/our child to attend this camp, I/we hereby agree to indemnify and hold Queen of Peace High School, its officers, directors, members, employees and transporting employees, harmless against any and all claims for loss, liability, damage or injury, including attorney fees, arising out of, connected with, or resulting, in part or in whole, from my/our child’s participation in this camp. Additionally, I/we hereby assign all rights, privileges and materials for reproduction to Queen of Peace High School of any and all photographs taken of our child by Queen of Peace or its recognized agents.

In order to secure your permission for your child’s participation in this experience and simultaneously release Queen of Peace High School from all liability while he or she is on the school grounds, please sign below.

Sincerely,

Ms. Linda Vorderer
Fine Arts Department

Medical and Medication Information

If your child has significant medical conditions or medication needs, a Parent/Guardian must contact the school at least 72 hours prior to the first day of camp to assure the supervisor will be alerted to the student’s needs. Do not send medication independently.

READ AND AGREED TO:

Parent/Guardian Signature Date

Student Signature Date

Parent/Guardian Printed Name

Student Printed Name

Reminder of allergic reactions for this student: _____