

ArtSeed Student Application/Parent Permission Form

ArtSeed's mission is to connect the most resourceful and gifted with the youngest and most vulnerable citizens of the Bay Area and beyond through projects that explore links between classical and cutting-edge fine arts disciplines.

Student's Name: _____ Date of Birth: _____

Parent/Guardian's Name: _____ Email: _____

Mailing Address: _____ Apt#: _____ City: _____ Zip _____

Home Phone Number: _____ Parent/Guardian Work Phone Number: _____ Cell: _____

School: _____ Rm# _____ Teacher _____

(In Case Of Emergency) Please list below the person to contact and phone number:

(Name) (Address) (Telephone #)

I give **(Name of Student)** _____ permission to participate in ArtSeed's Programs.

Fee Schedule (Bring a friend to split the cost!): \$50/hour for private **lessons**; \$150 for one daylong, 8-hour holiday **workshop** (\$75/day for 4-hour half day). \$480 advance payment for twelve, 2-hour **classes** afterschool or on weekends (\$20/hour). Parties of five or more get \$20/hour discounted hourly rate without advance payment.

- 1) I am interested in sliding scale private instruction (circle one): Yes No Call me to discuss
- 2) The most I can pay for: lessons \$_____, holiday workshops \$_____, afterschool/weekend classes \$_____.
Please submit a letter explaining your financial need if requesting a scholarship or sliding scale fees rate.
- 3) Please indicate below the times you would be most available:

Monday	___ - ___ am	___ - ___ pm	Evening ___ - ___	All day/other: ___ am - ___ pm
Tuesday	___ - ___ am	___ - ___ pm	Evening ___ - ___	All day/other: ___ am - ___ pm
Wednesday	___ - ___ am	___ - ___ pm	Evening ___ - ___	All day/other: ___ am - ___ pm
Thursday	___ - ___ am	___ - ___ pm	Evening ___ - ___	All day/other: ___ am - ___ pm
Friday	___ - ___ am	___ - ___ pm	Evening ___ - ___	All day/other: ___ am - ___ pm
Saturday	___ - ___ am	___ - ___ pm	Evening ___ - ___	All day/other: ___ am - ___ pm
Sunday	___ - ___ am	___ - ___ pm	Evening ___ - ___	All day/other: ___ am - ___ pm

I have materials (supplies, refreshments, prizes) or money to donate. Yes No Call me to discuss

I have expertise in the following areas: _____

Special Needs – Please list below (or on back) any special behavioral, physical, emotional, psychological or medical needs along with any learning differences of the student. (Call me to discuss)

Exposure to Sensitive Art Materials or Subject Matter – It is the responsibility of the student, and parent/guardian to communicate to ArtSeed instructors when a student participating in the ArtSeed Program may be sensitive to materials (for example, allergies to specific food, art supplies etc). We also wish to know if specific subject areas are particularly sensitive for your child. (Call me to discuss)

Photographs/Media/Artwork Waiver – By signing this form, you give permission to ArtSeed to use photographs, videotapes, film, and audiotapes in which your student appears and the art work and/or writings he/she produces as a participant in the ArtSeed Program for artistic, education, and publicity/promotional purposes for or related to the ArtSeed Program. These items can also be sold (up to 50% artist commission retained by request) or used by ArtSeed in published materials, in other works of art, and on the Internet (World Wide Web). After 6 months from the time of exhibition and/or end of class, unclaimed artworks may become the sole property of ArtSeed.

Exceptions: _____ (Call me to discuss)

General Release of Liability – The undersigned agrees to release, waive, discharge, and hold harmless ArtSeed, its directors, officers, employees, agents, and volunteers from any and all claims, suits, losses, or related causes of action for damages for any injury, illness, accident or any loss or damage to personal property or otherwise, during or arising in any way from participation in the ArtSeed program.

I acknowledge that this general release of liability of ArtSeed is binding on me personally and on my heirs, personal representatives, successors, and assigns. The undersigned has read and voluntarily signs the ArtSeed program parent/guardian permission form. I understand and agree to the policies as stated above.

Parent/Guardian or Student Signature _____ (if on behalf of student): _____

Date: _____ Print Name of Parent/Guardian or Student: _____

ArtSeed P.O. Box 29277, San Francisco, CA 94129-0277, W: 415-409-1761, Email: info@artseed.org,
Fax: 415-751-4442, **CONTACT:** Josefa Vaughan, Executive Director, C: 415-656-9849. www.artseed.org



Art Lessons, Workshops, and Apprenticeships for All Ages

Join us for art adventures after school, on weekends, or on school holidays!

We can work with you to plan classical and experimental lessons for projects such as:

Coloring Sound: Paint to music, score a picture to perform

Learn Artistic Anatomy or create a portrait from a live model!

Still Life: Printmaking and mixed media; **Landscapes:** Draw outdoors or from photos

Clay and Plaster Sculpture

Build your own Artist's Portfolio

Staff Development for school teachers

ArtSprouts: This class, for 3-5yr-olds, is also for caretakers.

Drawing, painting, printmaking, and sculpture in a real art studio with professional materials included! You can have one-on-one or small group instruction or an Apprenticeship with professional artists in a variety of disciplines. Lessons by appointment to fit your needs.

Classes formed and filled on request. Apply to volunteer or serve on the ArtSeed Youth Council.

ArtSeed's Labyrinth Studios are in Rooms 5-A, 5-B & 5-C on the second floor, Park Presidio United Methodist Church on 4301 Geary Boulevard at 7th Avenue in the Richmond District of San Francisco.

Find out more: drop in on Sundays from 1-3 p.m. or call Josefa at 415-656-9849.



**Tuition is on a sliding scale and first-come-first-serve basis.
Scholarships are available. No one is turned away for lack of funds!**

Josefa Vaughan, ArtSeed Founder and Director believes that we are all creators. She has practiced her teaching philosophy and exhibited her art in the U.S. and abroad since 1989.

ArtSeed P.O. Box 29277, San Francisco, CA 94129-0277, W: 415-409-1761, Email: info@artseed.org,
Fax: 415-751-4442, **CONTACT:** Josefa Vaughan, Executive Director, C: 415-656-9849. www.artseed.org