



PO Box 29277, San Francisco, CA 94129-0277

**ArtSeed Summer Intensive 2020 Student Application**

**Live Video Conferencing & On Location Outdoors in the Park (by appointment):**  
ArtSeed's Presidio Work Spaces, 1007 General Kennedy Avenue, Suites 206 & 210, S.F.

**(Please print clearly, more at the back)**

Check which weeks you will attend. ( ) **Week One: July 6 – 10, 2020** (weekdays 9am-5pm) for highly motivated youth (ages 9-19)  
Flexible age limits for remote participation. ( ) **Week Two: July 13 – 17, 2020** (weekdays 9am-5pm) for highly motivated children and youth (ages 6-19)  
( ) **Week Three: July 20 – 24, 2020** (weekdays 9am-5pm) for highly motivated children and youth (ages 6-19)

**Student Information:**

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School: \_\_\_\_\_ How have you come to know about ArtSeed? \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Parent/Guardian Work Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

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

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Phone Contact(s): \_\_\_\_\_ Please indicate any allergies to food/materials: \_\_\_\_\_

**Parent/Guardian Permission Form**

I give \_\_\_\_\_ permission to participate in ArtSeed's Summer Fine Arts Intensive.  
(Name of Student)

I understand that we may be going to urban areas in transition that have incidents of gang-related activities and properties that may have been identified as containing environmental hazards. Items 1-4 are on hold or by pre-arrangement only during Summer 2020 due to COVID-19 concerns of ArtSeed, Josefa Vaughan, and her associates. (Please circle "Yes" or "No" for each activity listed.)

- 1. To go to the Hunter's Point Naval Shipyard and Mission District art studios .....Yes No
- 2. To go on field trips .....Yes No
- 3. To travel by car (if available) to art studios and on field trips .....Yes No
- 4. To travel by public transportation to art studios and on field trips .....Yes No
- 5. To participate in supervised outdoor activities .....Yes No
- 6. To take supervised neighborhood walks .....Yes No
- 7. To work at ArtSeed's Presidio office..... Yes No

**At the end of the day (ArtSeed has only limited on location, outdoors in the park, and face-to-face activities):**

A. This student (name listed above) has my permission to leave the ArtSeed Program alone without a parent/guardian or a designated adult to pick him/her up. (Please circle "Yes" or "No.") Yes No

B. This student (name listed above) does NOT have my permission to leave the ArtSeed Program alone. He/she will be picked up by one of the following designated individuals:

\_\_\_\_\_  
(Name) (Address) (Telephone #)

\_\_\_\_\_  
(Name) (Address) (Telephone #)

(1) I can/will help in the lessons: YES NO

(2) I can/will help on field trips: YES NO

(3) I can/will donate materials or my expertise in the following areas (Please list below):

## **Fees Waived:**

Fees are waived during this health crisis but donations are appreciated and can be made at [www.artseed.org](http://www.artseed.org). The full cost of the program per student/per week has been \$400.00. Call Josefa at 415-656-9849 to chat about any challenges your family faces regarding art supplies or video conferencing capacity.

**The ArtSeed Program requires that each student's parents/guardians understand and accept its policies on the following issues. Please read the policies listed below and sign your name below to indicate your understanding and acceptance of these policies.**

Discipline Policy – A student's disregard of the ArtSeed program rules will result in a temporary or permanent suspension from its program. If the student's behavior is consistently unacceptable, ArtSeed reserves the right to dismiss the student from the program permanently. A student's repeated disregard of ArtSeed's collaboratively made and posted agreements with students may result in suspension from the program.

Special Needs? – Any special behavioral, physical, emotional, psychological or medical needs of the student should be clearly discussed with Josefa Vaughan and her associates by the parent/guardian. Please explain your special needs clearly in a telephone call, an email or write it down on an attached page.

Permission for Medical Treatment – In the event of an emergency in which the parent/guardian cannot be contacted, emergency medical staff and the ArtSeed staff/volunteers may take appropriate action as needed for the student.

Preferred Medical Emergency Center: \_\_\_\_\_

Exposure to Sensitive Art Materials or Subject Matter – Students participating in the ArtSeed Program may be exposed to sensitive materials (art supplies) or subject matters. ArtSeed encourages students and parents/guardians to let its instructors know when an art material or subject matter is uncomfortable for them. It is the responsibility of the student, and parent/guardian to communicate this to the ArtSeed instructors.

Photographs/Media/Artwork Waiver - I give permission to ArtSeed to make and use photographs, videotapes, film, and audiotapes in which my son or daughter appears or the artwork of my son or daughter appears. ArtSeed may use these photographs, videotapes, film, and audiotapes in published materials, in other works of art, and on the Internet (World Wide Web) for artistic, educational, and publicity/promotional purposes for or related to the ArtSeed Program. ArtSeed may retain 50% of any sale of my son or daughter's artwork, and may reproduce, sell and retain 50% of any sale of a reproduction of the artwork and/or writings he/she produces as a participant in the ArtSeed Program.

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, including but not limited to such claims that may result from any injury or 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 STATE ABOVE.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(on behalf of student)

Print Name of Parent/Guardian: \_\_\_\_\_

**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. We do not discriminate on the basis of any disability, race, color, creed, sexual orientation, political party, economic background, national or ethnic origin.

**ArtSeed** is a non-profit tax-exempt fine arts / youth leadership organization under Internal Revenue Code 501(c)(3) and Revenue and Tax Code 27301d. Any charitable contribution to ArtSeed, made without expectation of material benefit, is therefore fully tax-deductible. These determination letters are available for your inspection at ArtSeed's office located at 1007 General Kennedy Ave. in San Francisco. Our Employer Identification Number is: 52-2368513

**Email:** josefa@artseed.org, **Web site:** www.artseed.org, **Cell:** 415-656-9849

This form should be filled out and sent in by parents or guardians (reservations are on a first come first serve basis). **We prefer to receive confirmation of attendance at least one week before the first day of ArtSeed's Summer Intensive. Art supplies may be available to eligible families.** For questions contact Josefa at: 415-656-9849 or email: josefa@artseed.org