



BUFFALO GROVE PARK DISTRICT

Young Rembrandts



Young Rembrandts

For Grades 1 - 5

Make this a memorable winter by signing up your elementary child in a Young Rembrandts drawing class. Your child will learn about basic design and composition as they draw the Fish Below Ice and Great Wall of China. If your child is fond of sports, they will enjoy drawing our illustration featuring a Hockey Player. Besides strengthening your child's drawing and coloring skills, he or she will also learn about art history as we present lessons featuring master artists Leonardo Da Vinci and Franz Marc. Enroll your child today!

Wednesdays
January 16 - March 6

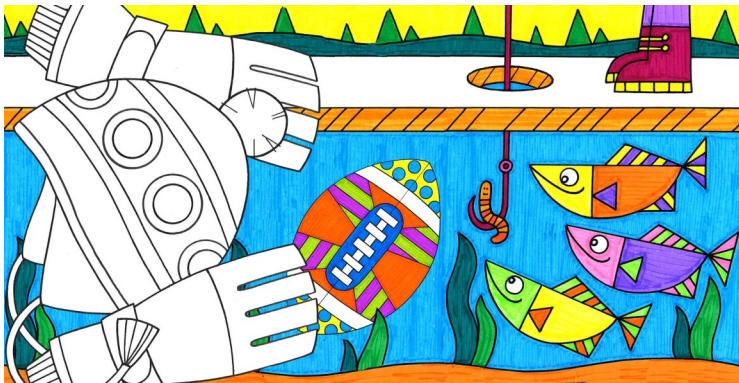
at Prairie
3:05 - 4:05 pm

Art Room *pickup in circle on Kingsbridge Way

On-line registration is available at bgparks.org
Set up your account today!

\$125 for a 8 week session

- Each session offers new lessons that focus on artistic fundamentals for new students and provide engaging challenges for returning students.
- Parents are responsible for transportation from school.
- All materials supplied by Young Rembrandts.
- Personal absences are forfeited.
- Cancellations will only be refunded if the spot can be filled to meet class minimum requirement.
- For questions call Amanda Busch 847.850.2134



Forms can be faxed to 847.459.5741

or mailed to

The Buffalo Grove Park District

530 Bernard Drive, Buffalo Grove, IL 60089

Student Name _____ Birth Date _____ Gender _____ Home Phone _____

Parent Name _____ Parent contact phone number after school _____

Street Address _____ City _____ State _____ Zip Code _____

Parent's Email _____

Waiver and Release of All Claims - Must be signed or registration cannot be processed.

Please read this form carefully and be aware that in registering yourself or your minor child/ward for participation in Buffalo Grove Park District programs, you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of said programs.

I recognize and acknowledge that there are certain risks of physical injury to participants in the program(s), including transportation services, for which I have registered and I agree to assume the full risk of any such injuries, damages or loss, regardless of severity, which I or my child/ward may sustain as a result of participating in any activities connected or associated with any such program(s), including transportation services. I waive and relinquish all claims I or my child/ward may have against the Park District and its officers, agents, servants and employees as a result of participation in any of these program(s), including transportation services. I hereby fully release and discharge the Park District and its officers, agents, servants and employees from any and all claims from injuries, damage or loss which I or my child/ward may have or which may accrue to me or my child/ward on account of my participation or the participation of my child/ward in any of these program(s), including transportation services. I further agree to indemnify and hold harmless and defend the Park District and its officers, agents, servants and employees from any and all claims resulting from injuries, damages and losses sustained by me or by my child/ward, and arising out, connected with, or in any way associated with the activities of any of the program(s), including transportation services.

Photo Disclaimer: Registrants and participants of programs and special events permits the Park District to take photos and videos of themselves and their child/ward for publication in the program brochure, website and additional uses as the Park District deems necessary unless the registrant or participant expressly files with the Park District a written objection as to photos or videos of themselves and/or their child/ward.

I have read and fully understand the program details and waiver and release of all claims.

Payment (Payable to Buffalo Grove Park District)

Class # 361160-02

Cash Check Credit Card (V/MC/ Discover)

Name on Card _____

Card Number _____ Exp _____

Signature _____ Date _____

Signature of Participant (or of parent If participant is under 18)

Date

Printed Name