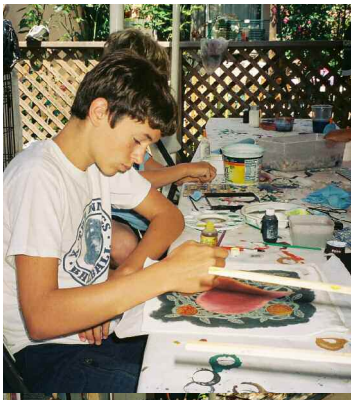

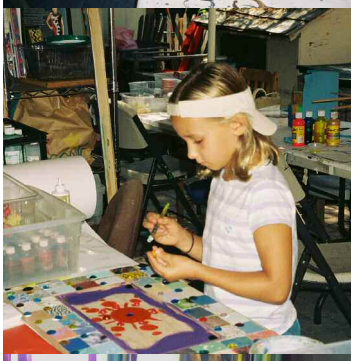

Ohlone Art Camp

2008

Ohlone Art Camp started at Ohlone Elementary School but moved to my studio during remodeling at school. I kept the name because I am sure that Ohlone Indians lived in my neighborhood; I have found arrowheads, bones, and seashells in my yard!

6th Annual Spring
11th Annual Summer Camp

Silk painting, embroidery, masks, mosaics and more!
Let's create ART AL FRESCO under a canopy!

Play with my **two rambunctious but very friendly dogs**, Sugar and Kita, Henry the **guinea pig** and even hold Willy the **corn snake**! Don't feel like drawing today? Bring your book and read or visit the vegetable garden! Weed pullers welcome!!

Camp is held in my back yard at 245 Wilton Avenue in Palo Alto.

REMEMBER MY 3 RULES: • HAVE FUN • SLOW DOWN • NO ERASERS ALLOWED BECAUSE THERE IS NO SUCH THING AS A MISTAKE IN ART!

Hours: 9 a.m. to 1 p.m., Monday-Friday

Open for ages 5 and up (TEENS WELCOME!) and attendance is recommended for children who can maintain concentration for 4 hours on a daily basis.

*(Please note: this is **NOT** a child care service!)*

SIGN UP AND PAY NOW TO GUARANTEE YOUR PLACE!

SPACE IS LIMITED SO ENROLLMENT IS FIRST-COME, FIRST-SERVED.

Cost: $175.00 per week per child includes all supplies

Enclose checks payable to Kristen Johnson and mail to:
245 Wilton Ave., Palo Alto, CA 94306

650.493.4383 - **Email: graffikdezine@comcast.net**

SPRING SESSION
- ❒ March 24-28

SUMMER SESSIONS
- ❒ June 16
- ❒ June 23
- ❒ June 30
- ❒ July 7
- ❒ July 14
- ❒ July 21
- ❒ July 28
- ❒ August 4
- ❒ August 11
- ❒ August 18

CHILD NAME _____

AGE _____ SCHOOL _____

ADDRESS _____

CITY/ZIP _____

PARENT NAME _____

PHONE _____

EMAIL _____

☛ **COMPLETE THE EMERGENCY FORM ON THE NEXT PAGE AND RETURN WITH YOUR PAYMENT**

Refunds (less a $20 processing charge) will be made only if cancellation is at least three (3) weeks prior to the week of participation. A $20.00 fee will be charged for returned checks.

Visit ohloneartcamp.com

For camp use only: Received ____ / ____/____ Check #_____ $_____

Ohlone Art Camp Emergency Contacts

This form must be completed and returned with payment.

Child #1	**Child #2**
Name _____ **Age** _____ **School** _____ ❒ **IS allergic to** _____ ❒ **IS allergic to peanuts** ❒ **is NOT allergic to any medications.**	**Name** _____ **Age** _____ **School** _____ ❒ **IS allergic to** _____ ❒ **IS allergic to peanuts** ❒ **is NOT allergic to any medications.**
Child #3	**Child #4**
Name _____ **Age** _____ **School** _____ ❒ **IS allergic to** _____ ❒ **IS allergic to peanuts** ❒ **is NOT allergic to any medications.**	**Name** _____ **Age** _____ **School** _____ ❒ **IS allergic to** _____ ❒ **IS allergic to peanuts** ❒ **is NOT allergic to any medications.**

❒ **In case of emergency, I/we authorize Kristen L. Johnson to contact paramedics and transport my child/ren to the nearest hospital.** _____ ***(Initial)***

❒ **In case of minor scrapes, I/we authorize the use of an antibacterial spray to be used with a bandage.** _____ ***(Initial)***

I understand that by signing this document, I am releasing Kristen L. Johnson and Graffik Dezine from any and all liability for personal injury, including physical, emotional, pain, and suffering injuries and/or property loss and damage which my child/ren incurs as a result of participation in the Ohlone Art Camp.

Parent/guardian signature _____

Parent's name (*please print*): _____

Address _____ City_____ Zip Code_____

PLEASE CHECK PRIMARY PHONE TO BE CALLED IF NECESSARY DURING CAMP HOURS:

❒ Home Phone: (_____) _____

❒ Parent #1 Work Phone: (_____)_____ ❒ Cell Phone: (_____) _____

❒ Parent #2 Work Phone: (_____)_____ ❒ Cell Phone: (_____) _____

E-mail *(PLEASE PRINT CLEARLY)*: _____

Your email address is important for additional classes and early registration.

In case of emergency please contact (if parents listed above are not available):

#1 Name: _____ Relationship _____

❒ Home Phone: (_____) _____ ❒ Work Phone: (_____) _____

❒ Cell Phone: (_____) _____ City _____

#2 Name: _____ Relationship _____

❒ Home Phone: (_____) _____ ❒ Work Phone: (_____) _____

❒ Cell Phone: (_____) _____ City _____