



Summer Art Classes



Place: Pinewood Elementary
200 Rickwood Road
Timonium, MD 21093

Cost: \$75.00

Dates: July 6, 2010 – July 30, 2010

For students in grades 1 – 5

The Summer Art Program will feature art experiences in painting, drawing, scul
and clay with Ron Brigerman and Andrea Scott.
All materials are included in the cost of the class.

Class Sections and Times:

Mondays and
Wednesdays

Or

Tuesdays and
Thursdays

A 9:00 – 10:00
B 10:00 – 11:00
C 11:00 – 12:00

D 9:00 – 10:00
E 10:00 – 11:00
F 11:00 – 12:00

For more information call Ron Brigerman at 410-683-1845.

"

-----Cut here and return bottom portion-----

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____

Class (circle one): A B C D E F

Make check payable to LTRC. Mail check and registration form to:

Attention: Ron Brigerman
305 Sherwood Road
Cockeysville, MD 21030

ACKNOWLEDGEMENT, WAIVER AND RELEASE OF LIABILITY: I HEREBY CONFIRM PARTICIPANT IS IN GOOD HEALTH AND ABLE TO PARTICIPATE IN THE ACTIVITY, I ACKNOWLEDGE THE ACTIVITY MAY INVOLVE RISKS AND DANGER OF BODILY INJURY OR DEATH. I FULLY ACCEPT AND ACKNOWLEDGE THE ACTIVITY MAY INVOLVE RISK AND I HEREBY ASSUME THE RISK AND RESPONSIBILITY FOR ALL DANGERS AND RISKS ASSOCIATED WITH PARTICIPATION IN THE ACITIVITY. I acknowledge Baltimore County, Maryland, the recreation council, and their respective employees, directors, officers, volunteers, members and any other participa entity, party or person involved in any regard with the activity or the activity premises, and their respective agents, personal representative heirs, employees, contractors, successors and assigns (each an "Activity Representative" and collectively the "Activity Representatives"), SHALL NOT BE RESPONSIBLE OR LIABLE IN ANY REGARD OR MANNER FOR ANY AND ALL PROPERTY DAMAGE OR BODILLY INJURY (INCLUDING SERIOUS PHYSICAL INJURY OR EVEN DEATH) INCURRED BY PARTICIPANT OR ANY PARTY RELATED THERETO AS A RESULT OF HIS/HER PARTICIPATION IN THE ACTIVITY.

I have read, fully understand and hereby freely sign, approve of, and agree to the terms of the registration form. I HEREBY UNCONDITIONALLY RELEASE, DISCHARGE, COVENANT NOT TO SUE, WAIVE MY RIGHTS AND REMEDIES, AND AGREE TO HOLD HARMLESS THE ACTIVITY REPRESENTATIVE from any and all claims costs, demands, losses, damages, or expenses associated with, in whole or in part, participants involvement with the activity. I certify all answers and information provided on the registration form are the best of my knowledge true and correct throughout the activity. I shall inform the recreation council, in writing, if any of the information provided in the registration form is incorrect or changes during the course of the activity. I understand Baltimore County and/or the recreation council do not perform criminal and/or background checks on activity representatives. I shall present a government-issued photo identification card including, but not limited to, my driver's license, passport, or United States Visa to the activity representative for review requested, at the time I submit this registration form to the recreation council.

Signature of Participant (if under 18) OR of Parent/Guardian (if under 18): _____

Date: _____