**Imagine… Express… Create…**

Exploring Art: An After School Art Class

**Let’s Paint!** Who doesn’t like to pick up a brush and start playing with colors?

[](http://www.google.com/url?sa=i&rct=j&q=&esrc=s&source=images&cd=&cad=rja&uact=8&ved=0ahUKEwiVpauc-4fMAhWC7CYKHaMDD_AQjRwIBw&url=http://www.babble.com/crafts-activities/diy-make-your-own-paint-by-number-kit/&bvm=bv.119028448,d.cWw&psig=AFQjCNHXnUizAXoP6nO0YBCsXvcNaxnKUA&ust=1460511370208132)This session will focus on acrylic paints. We’ll venture into color theory (learning how colors work) and really get to explore the medium (acrylic paints). After several projects we will conclude the series AND the school year with a canvas painting!

This series comes as a request from one of the students. I love that they want to learn more! I’m excited with what we will be able to accomplish during this series! I would love to see new faces for this final group. Even if you haven’t taken a class all year, you can still join us. This is the first time this year we will be working with paints.

I hope that you can join us for this Acrylic Painting series. If you are interested in taking this class, there is an enclosed form that can be filled out and returned to the school office.

Please feel free to contact me with any questions. [www.artwithmsaudrey.com](http://www.artwithmsaudrey.com)

Audrey Waid

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Art with Ms. Audrey

May/June 2016

**Art Enrichment: After School Art Class**

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**May and June Session (May 2, 9, 16, 23, and June 6)**

**Grades 5-12**

**Mondays from 3-4:30**

**Tuition, including supplies and a simple snack for this 5 week class, is $50.**

If you are interested in taking this 5 week session of After School Art Classes please sign and return the form below.

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade/age \_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact (during class- Mondays 3-4:30)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Information you would like me to be aware of (allergies/medical conditions, etc.)

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Parent/Guardian signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ Yes- Permission to photograph student work (never faces or names) for promotional purposes. Students can also let me know if they do not want a specific piece photographed.

\_\_\_\_\_ No- I would rather student work not be photographed.