



## Participant Registration Form Performing Arts Camp July 21 – August 1, 2014

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Sex: M/F \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ email: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ Phone (alternate): \_\_\_\_\_ Emergency Name # \_\_\_\_\_

Name of School: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy # and carrier: \_\_\_\_\_

**Please read the following carefully: Parent/Guardian please initial by each paragraph**

Permission is hereby granted for my son/daughter/ward or myself, as named above, to participate in programs, activities and field trips associated with the Louisville/Jefferson County Metro Parks Department. I understand these activities will be supervised by employees and volunteers of the Louisville/Jefferson County Metro Parks Department. \_\_\_\_\_

I am aware that strenuous activities could be involved in the above named person's participation in programs activities, and field trips associated with the Louisville/Jefferson County Metro Parks Department, and I have determined that the above named person's health is adequate for him/her or myself to participate safely in such programs, activities and/or field trips. \_\_\_\_\_

I understand and agree that any injuries sustained by the above named participant will not be paid for by the Louisville/Jefferson County Metro Government, or the Louisville/Jefferson County Metro Parks Department, and that adequate medical insurance to cover such injuries must be acquired and maintained on behalf of the above named participant. \_\_\_\_\_

I agree, as parent or legal guardian on behalf of \_\_\_\_\_, or on my own behalf as a legal adult, and behalf of his/her/my heirs or legal representatives to forever refrain from asserting against the Louisville/Jefferson County Metro Government, the Louisville/Jefferson County Metro Parks Department, its elected and appointed officials, employees, agents, servants and successors in interest thereof, any claim, demand, action or suit whatever kind or nature, either directly or indirectly for injuries or damages to persons or property resulting from the above named person's participation in any Louisville/Jefferson County Metro Parks Department programs, activities and/or field trips. \_\_\_\_\_

I agree as parent or legal guardian on behalf of \_\_\_\_\_, or on my own behalf as a legal adult, to indemnify and hold harmless the Louisville/Jefferson County Metro Government, the Louisville/Jefferson County Metro Parks Department, its elected and appointed officials, employees, agents, servants and successors in interest from all claims, damages, losses and expenses including attorney's fees, arising out of above named person's participation in such programs, activities and/or field trips, included damages or injuries arising out of transportation to and from any such related Louisville/Jefferson County Metro Parks Department activity. \_\_\_\_\_

Parent/Guardian/Legal Adult: By placing your signature below, you certify that you have carefully read this form, and the terms and conditions set forth herein; and you agree to abide by said conditions and terms, and certify all information is true, current and correct and may be relied upon by the Louisville/Jefferson County Metro Parks Department.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ Relationship to Participant: \_\_\_\_\_

The Louisville/Jefferson County Metro Parks Department documents recreation programs for promotional use year-round. Photographs and videotape may be taken to be used in brochures, seasonal program guides, public event displays, department program videos, or other uses. If the Louisville/Jefferson County Metro Parks Department has your permission to photograph or videotape your child or yourself while participating in various activities, please sign on the line provided.

Signature for Photo Release: \_\_\_\_\_



**METRO PARKS  
AND RECREATION**

**Metro Parks Shawnee Arts & Cultural Center Performing Arts Camp  
*in Partnership with*  
Erica Denise Entertainment  
July 21 – August 1, 2014**

**What:** A two-week performing arts camp for middle and high school students who have an interest in the arts. Programs offered in dance, fashion/costume design, intro to acting, intro to keyboard, producing/directing, script writing, and voice lessons.

**When:** July 21<sup>st</sup> through August 1<sup>st</sup>, Monday through Friday from 6:00 pm – 9:00 pm.

**Where:** Shawnee Arts & Cultural Center located at 607 South 37<sup>th</sup> Street between Broadway and River Park Drive (corner at Del Park Terrace).

**Program Contacts:** Erica Bledsaw, Erica Denise Entertainment, 502.314.4335  
Portia White/Donald Trowell, Shawnee Arts & Cultural Center, 502.775.5268.

**There are seven arts disciplines offered during the two-week camp. Students will be able to participate in two, 90-minute classes. Below, please choose your top three disciplines, ranking them 1 through 3. Because space is limited, each student is required to write an essay explaining why they love the performing arts and why they should be chosen to participate.**

\_\_\_\_\_ Dance (Hip-Hop) lead by Lonneta Grimes- Martin

\_\_\_\_\_ Fashion/Costume Design lead by Fhonia Ellis

\_\_\_\_\_ Intro to Acting lead by Lanisha Gholston

\_\_\_\_\_ Intro to Keyboard lead by Andrea Diggs

\_\_\_\_\_ Producing/Directing lead by Rush Trowel

\_\_\_\_\_ Script Writing lead by Karen Hunter

\_\_\_\_\_ Intro to Voice lessons lead by Yalonda JD Green

Program Director: Erica Denise

**Registration Deadline is Friday, June 27<sup>th</sup>  
Please send registration forms and essays to  
Shawnee Arts and Cultural Center  
607 S. 37<sup>th</sup> Street  
Louisville, KY 40211**