



**Arts in the Parks – Winter/Spring, 2010
Burnet Park Arts and Crafts Facility**

Registration Form

Participant Name: _____

Age: _____ **D.O.B:** ___/___/___ **Gender:** M / F

Parent/Guardian (if under 18): _____

Address: _____ **Phone:** _____

City/State/Zip: _____ **Cell:** _____

E-mail address: _____ **Emergency:** _____

CLASS NAME	DAYS	TIME

Spring, 2010 Programs (space is limited):

Clay for Kids (age 12-16)	Tuesdays, 4:30-6pm	3/30/10 – 5/11/10
Adult Beginner Water Color	Mondays, 4:30 – 6pm	3/15/10 – 5/17/10
Adult Beading I	Mondays, 4:30 – 6pm	3/29/10 – 6/14/10
Adult Beading II	Mondays, 2:00 – 4pm	3/29/10 – 6/14/10
Adult Intermediate Beading	Fridays, 4:00 – 6:30 pm	4/2/10 – 6/18/10
Adult Beginner Quilting	Tuesdays, 12:30 – 2:30 pm	2/2/10 – 6/15/10
Adult Advanced Quilting	Thursdays, 9:30am – 12:30 pm	2/4/10 – 6/17/10
Adult Wheel Pottery	Mondays, 9:00 – 11:00am	1/4/10 – 6/15/10
Adult Wheel Pottery	Mondays, Noon – 2:30pm	1/4/10 – 6/15/10
Adult Wheel Pottery	Tuesdays, Noon – 2:30pm	1/5/10 – 6/16/10
Adult Hand Building Clay	Tuesdays, 12:30pm – 2:30pm	1/5/10 – 6/16/10
Adult Hand Building Clay	Fridays, 9:30am – Noon	1/8/10 – 6/18/10
Adult Pre-Cast Ceramics	Mondays, 12:30pm – 2:30	1/4/10 – 6/15/10
Adult Pre-Cast Ceramics	Tuesdays, 9:00 – 11:00 am	1/5/10 – 6/16/10

Please return by mail, fax, e-mail or in-person.

Syracuse Parks Department // 412 Spencer Street // Syracuse, NY 13204

315-473-4789-phone // 315-428-8513-fax // web: www.syracuse.ny.us/parks

Waiver: In consideration of your acceptance of this entry for myself, heirs, executors and administrators, I hereby release the City of Syracuse and all its officers, employees and agents from any claims, liability, damage or expense that I may incur relating directly or indirectly to my or my child’s participation in any such activities relating to the program or events, including transportation to and from any such clinics/meets relating to such.

Participant Signature: _____ Date: _____

Parent/Guardian: _____ Date: _____
(if under 18)

Office Use Only:

Date Received: _____

Payment (Cash) N/A

Amt: NA