

Beresford Parks, Rec. & Community Education (PRCE)

305 W. Oak Street
Phone (605)763-2094

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Director: Scott Klungseth

Beresford, SD 57004
Fax (605) 763-2705

Youth Art Program Registration 2019

We will work with kids to enhance their artistic skills through a variety of art activities such as: calligraphy, bullet journaling, printmaking, pencil and charcoal drawing, watercolor and acrylic painting. At the end of the program there will be a Art Showcase for parents and community to walk through to see the various artistic abilities of the program participants.

*Wednesday and Thursday Mornings: June 5, 6, 12, 13, 19, 20, 26, 27; July 10, 11, 17, 18, 24, 25

Youth in Grades 3rd and 4th (19-20 school year): 10:00-10:50 a.m.

Youth in Grades 5th and 6th (19-20 school year): 11:00-11:50 a.m.

Cost: \$50 per participant that includes all necessary art supplies

Location: Yet to be determined (we will let all registrants know prior to the first day)

Payable to: PRCE, 305 W. Oak St. Beresford SD 57004

Program Instructors:

The Arts Program will be taught by Sophie Seivert supported by Beresford High School Seniors and Alumni under the advisement of Beresford Art Teacher: Mrs. Saugstad

Questions: please call Director at 763-2094 or email scott.klungseth@k12.sd.us

----- cut here and keep above info!!!! -----

2019 PRCE Youth Art Program Registration

One sheet per Youth please & return to the Community Education Building

Youth Name _____ Youth Grade Level (19-20 school year): _____

Youth Birthdate: _____ Parent(s) Name: _____

Parent Email _____

Parent Cell _____ Local emergency contact name/number _____

PH# _____

Beresford PRCE, in making this recreational activity available, assumes no responsibility for injury. The responsibility for injury is assumed entirely by the participant. Participants in recreational activities are not covered by any special insurance coverage, therefore, participants should have adequate insurance coverage. I ACCEPT THE RESPONSIBILITY AS STATED ABOVE. I have consulted a physician and am confident that I am currently have not medical conditions that should preclude me from participating in this fitness-based activity.

Parent Printed Name _____

Parent Signature _____ Date _____, 2019