

Art in Action

Sponsored by New Hope Parks and Recreation

Printing Potpourri



Youth in grades 1-5 will use simple materials like string, tag board and foam to make a variety of printing plates to create pictures, cards and even a t-shirt. The possibilities are endless! This program is taught by Joan West Talbot, Robbinsdale Art Teacher for over 20 years. Please bring a t-shirt

for the second class meeting.

Course: 7129

Dates: Wednesdays, February 22-March 7

Time: 6:15-7:30 p.m.

Location: Robbinsdale Middle School Art Room 111
3730 Toledo Ave N, Robbinsdale

Fee: \$24 per class residents of New Hope, Crystal and Robbinsdale

\$31 per class nonresidents

Angry Birds Art

Youth ages 5-12, in this class we will "slingshot" into the incredible world of art as we create your favorite Angry Bird. We'll be working with clay and paint to create these masterpieces! Register by March 9.

Course: 7133

Date: Saturday, March 17

Time: 12:30-3 p.m.

Location: Crystal Community Center
4800 Douglas Drive

Fee: \$18 Residents of New Hope, Crystal and Robbinsdale

\$25 Nonresidents



REGISTER WITH: New Hope Parks & Recreation
4401 Xylon Avenue North
New Hope, MN 55428

No refunds will be given unless class is cancelled by the Parks & Recreation Department. Confirmations are not sent. Participants should attend the class, unless informed that it is filled or cancelled. Sorry, exceptions for ages cannot be made. Payment by check authorizes the city to use information from your check to make a one-time electronic fund transfer from your account. *Phone registrations accepted with a major credit card.* QUESTIONS? Call 763-531-5151

Online Registration! Go to www.ci.new-hope.mn.us and click on **Rec Express**. You will need a Password and Client ID number to register online. Call 763-531-5151 to obtain this information.

 www.facebook.com/newhoperecreation

Art in Action - Winter/Spring 2012

Participant Name _____ Phone (h) _____ (w) _____

Address _____ City _____ Zip _____

Birthdate _____ Age _____ Sex _____ Email _____

Activity _____ Course # _____ Date(s) _____ Time _____

Does participant have a special need? _____ Amount Enclosed \$ _____

I, the undersigned parent or guardian, authorize the City of New Hope to disclose to the City's insurer, attorney, staff, coaches, and other personnel involved in this program, the participant's name, address and telephone number for the purpose of program administration. I understand that the records are protected under state and federal privacy regulations and cannot be disclosed without my written consent unless otherwise provided by law. I hereby agree to allow the individual named herein to participate in the aforementioned activity, and further agree to hold the City harmless for any claim resulting from participation in this activity. I further give consent for any photos or videos taken during the program to be used by the City for promotional materials.

Parent/Guardian Signature _____ Date _____