



ART  
CENTER  
EAST



# Art Center East

## COMMUNITY AFRICAN DRUMMING

SPRING 2017 Season : April 4 – June 6, 2017 (10 weeks)

Loso Hall Rm 123, 6 – 7pm

*Eastern Oregon University campus*

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Emergency Contacts:**

1. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**FEES:**

\$45 (Spring Term: 4/4 – 6/6, 2017)

Loso Hall Rm 123 / 6 – 7pm

Cash	Check (Payable to Art Center East)	Credit Card (Please call Art Center East)

*LIABILITY RELEASE – In consideration of accepting the above named participant in our program, the undersigned individual or parent/guardian of student, hereby agrees to indemnify and keep harmless, Art Center East and Eastern Oregon University and their employees against any all liability claims, judgments, or damage arising as a result of participation in our program, or as a result of any course of instruction or supervision given the participant those entities listed above. Furthermore, said entities are not responsible for the supervision of participant either before or after regularly scheduled class time.*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

*PHOTO RELEASE – I hereby grant Art Center East and its employees and Agents (local/regional newspapers and other organizations) the right to photograph my child and use the photo for publication purposes only. The photos may be used in Art Center East publications that are designed to promote Art Center East (brochures, newsletter, website, social media, etc.) and/or other agency publications. All pictures used will be anonymous to maintain privacy.*

*I grant permission to use my photograph.*

*I do not grant permission to use my photograph.*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*