



Registration

Summer Art Camp

Please fill out the information below, and return it to: Tampa Museum of Art, 120 West Gasparilla Plaza, Tampa FL 33602 or fax: 813.274.8732. Please make all checks payable to the Tampa Museum of Art. You may also call 813.421.8373 or email laura.cook@tampamuseum.org.

Child's Name: _____ DOB: _____

Parent Name (s): _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

2nd Parent Name: _____ Phone: _____

Emergency Contact: _____	Phone: _____
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Please check below the sessions you wish your child to attend. Please mark clearly your 1st, 2nd, and 3rd choice in the left column.

Ages 6-10		
AM PM	June 21- June 25	<u>Drawing and Painting</u>
AM PM	June 28-July 2	<u>Visual Storytelling: Comic and Illustration</u>
AM PM	July 12- July 16	<u>2D & 3D Techniques: Material Explorations</u>
AM PM	July 19-July 23	<u>Mixed Media and Sculpture</u>
AM PM	July 26-July 30	<u>Conserve, Collect and Create</u>
Ages 11-14		
AM PM	August 2- August 6	<u>Drawing and Painting</u>

Signature of Parent/ Guardian _____ Date: _____

Please make all checks payable to the Tampa Museum of Art. To pay with credit card, please fill out the information below.

Name: _____	Card Type: _____
Card Number: _____	CVC (on back of card): _____
Billing Zip Code: _____	Exp Month, Year: _____