



# ARTiculate Leadership in the Arts Program

July 18-29, 2011

### PLEASE PRINT

Name: \_\_\_\_\_ Age: \_\_\_\_\_

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

Postal Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_ School: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Work/Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Alternate/Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

### MEDICAL INFORMATION

Health Card # \_\_\_\_\_ Family Doctor: \_\_\_\_\_

Please list any physical/psychological/emotional/behavioural conditions (including asthma, food allergies, migraines, diabetes, epilepsy, ADD, autism etc.) and outline how best to ensure a positive experience for your child, and all participants, in consideration of this condition(s).

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### CONDITIONS OF ENROLLMENT

ARTiculate aims to create a safe environment in which youth feel comfortable expressing themselves artistically amongst their peers. In order to ensure that all participants have a positive experience, the Camp Coordinator reserves the right to dismiss a participant who is, in her opinion, threatening the safety of other participants or disrupting their experience by rejecting the rules of the program. (Program rules will be outlined on the first day.)

The parents/guardians submitting this application give their permission for any photographs, videos or testimonials of the applicant to be used in Lakeshore Arts promotional materials and on the Lakeshore Arts website, unless indicated here:  (Permission denied)

While all reasonable precautions are taken for the safety and good health of the campers, Lakeshore Arts staff are hereby released from any and all liability in the event of illness, accident or misfortune that may occur to the participant and his or her property. In a medical emergency, Lakeshore Arts staff has the right to arrange for any medical services deemed appropriate, though every effort will be made to contact the parent/guardians as soon as possible. The parent/guardians are responsible for any expenses that may result from such services.

The program will be held at Mimico Baptist Church, 80 Hillside Avenue, from 9:30-4:00, Monday to Friday (except as otherwise indicated on the itinerary provided before the start of camp). This two-week program includes 2 full-day field trips downtown. On field trip days, participants can be dismissed from downtown, the subway, or Mimico Baptist Church. Please indicate your choice here:

- Dismissed from downtown
- Dismissed at Royal York Station
- Dismissed at Mimico Baptist Church
- Other \_\_\_\_\_

*At Lakeshore Arts, it is our priority to provide accessible programming for children and youth. Through our fundraising efforts and the generosity of community sponsors, we are able to offer this program free of charge. We encourage those who are able to afford a program fee (\$295.00), in full or part, to make a donation to support future programming. A charitable receipt will be provided.*

I would like to make a donation to Lakeshore Arts in the amount of \_\_\_\_\_

Method of Payment:  Cheque enclosed (payable to Lakeshore Arts)

- Credit Card:  Visa  
 Mastercard

Card # \_\_\_\_\_ Expiry Date \_\_\_\_/\_\_\_\_

I have read, understood and hereby agree with the conditions of enrollment. I, the undersigned, the parent/guardian of the aforementioned child, do hereby consent to his/her participation in ARTiculate Leadership in the Arts Program.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Upon receipt of your registration form, we will confirm your child's enrolment. A complete itinerary will be provided before the start date of the program.

Applications can be mailed to:

Lakeshore Arts, 2422 Lakeshore Blvd. West Toronto ON, M8V 1C4 Attn: ARTiculate

Questions? Email Melissa at [yam@bellnet.ca](mailto:yam@bellnet.ca) or call the Lakeshore Arts office at (416) 201-7093

***Thank you to our ARTiculate Community Sponsors!***  
**Humber College, Dandy Computers, Kassel's Pharmacy, Lakeshore Valu-Mart,  
Mark Grimes and Taste Portuguese Cuisine**

# ARTiculate PARTICIPANT INFORMATION

## Artistic Statement

Please write, draw, record or film your answer to the following:

**How does art make a difference in your life?** (Feel free to attach additional pages and/or documentation)

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Artistic Interests: (Check all that apply)

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|--------------------------|-------------------------|--|---|
| <input type="checkbox"/> | <b>Music/Sound</b>      | Composition <input type="checkbox"/>           | Singing <input type="checkbox"/>            |
|                          |                         | Performance <input type="checkbox"/>           | Other _____                                 |
|                          |                         | Do you play an Instrument? If so, which? _____ |   |
| <input type="checkbox"/> | <b>Dance</b>            | Hip-hop <input type="checkbox"/>               | Ballet <input type="checkbox"/>             |
|                          |                         | Break-dancing <input type="checkbox"/>         | Tap <input type="checkbox"/>                |
|                          |                         | Contemporary <input type="checkbox"/>          | Other _____                                 |
| <input type="checkbox"/> | <b>Visual Art</b>       | Painting <input type="checkbox"/>              | Drawing <input type="checkbox"/>            |
|                          |                         | Photography <input type="checkbox"/>           | Print-making <input type="checkbox"/>       |
|                          |                         | Sculpture <input type="checkbox"/>             | Public Art <input type="checkbox"/>         |
|                          |                         | Textiles <input type="checkbox"/>              | Other _____                                 |
| <input type="checkbox"/> | <b>Film</b>             | Animation <input type="checkbox"/>             | Documentary <input type="checkbox"/>        |
|                          |                         | Features <input type="checkbox"/>              | Shorts <input type="checkbox"/>             |
|                          |                         | Screenwriting <input type="checkbox"/>         | Other _____                                 |
| <input type="checkbox"/> | <b>Creative Writing</b> | Poetry <input type="checkbox"/>                | Dub-poetry <input type="checkbox"/>         |
|                          |                         | Fiction <input type="checkbox"/>               | Other _____                                 |
| <input type="checkbox"/> | <b>Digital</b>          | Web design <input type="checkbox"/>            | Photo-manipulation <input type="checkbox"/> |
|                          |                         | Other _____                                    |   |
| <input type="checkbox"/> | <b>Drama</b>            | Acting <input type="checkbox"/>                | Playwriting <input type="checkbox"/>        |
|                          |                         | Improv <input type="checkbox"/>                | Other _____                                 |
| <input type="checkbox"/> | <b>Other</b>            | _____  |   |

How did you hear about ARTiculate Leadership in the Arts?

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