



**ADULTS AGE 19 & UP (Adults & Senior Citizens)**

This class is for anyone who loves drawing and painting. Even if you haven't painted in a while, here is your creative outlet! You can improve on your drawing skills and explore various techniques and media. Each person has the opportunity to grow and develop their skills and creativity at their own pace. We supply a variety of media: Water-based Paints (Acrylic, Watercolor, and Tempera), Vine Charcoal, Oil and Chalk Pastels, Graphite, Color Pencil, Water-color Pencil, and Ink. No matter your skill level, this is the place to explore artistic concepts such as shading, proportion, composition and color mixing. Adult students pursue their individual artistic interests and enjoy the company of like minded artists. For more info, please e-mail instructor at [Jo@artistsinbloom.info](mailto:Jo@artistsinbloom.info)

**Session Date: Fridays, October 22- Nov.12, 2021**

<u>Day of the week</u>	<u>Ages</u>	<u>Times</u>	<u>Fee (Res./NR)</u>	<u>Site</u>	<u>Activity #</u>
Fridays	19 & Up	7:35-8:35pm	\$80/\$90 (4 weeks)	Marshall Ctr. Rm. A	201504-29

**Supplies Needed:** 11x15 watercolor pad (140lbs), 11x14 drawing pad (70lb), graphite pencils (HB, 2B, 4B, 6B) Pencil Sharpener, Kneaded Eraser.

**Or** just bring what you love working on. You may bring any favorite supplies or media with you, but please, no solvent based paints or inks.

**For questions about supplies contact “Miss Jo” Rancel at 703-501-3489.**

**Registration Dates: September 27– Oct.15, 2021      Location: Marshall Center Room A**

Complete the registration form and return it, along with the fee, to the Parks and Recreation Department located at Loriella Park. Class is open on a first come, first serve basis or until full. Make checks payable to: “**Treasurer, Spotsylvania County**”. There is a \$50 service charge on all returned checks. There will be an additional charge of \$10 on all late registrations.

**Register online at [www.spotsylvania.va.us/parksandrec](http://www.spotsylvania.va.us/parksandrec). A Household Waiver needs to be completed and on file at the Parks and Recreation office prior to registering online.** 2.75% NON-REFUNDABLE CONVENIENCE FEE CHARGED ON ALL CREDIT/DEBIT CARD TRANSACTIONS.

**Withdrawals:** Those wishing to withdraw from the program must do so by contacting the Spotsylvania Parks and Recreation Department by the posted registration deadlines. Individuals should follow up their verbal cancellation request with a written refund request. A 20% administrative fee will be charged on all refunds. Failure to attend class does not constitute a proper withdrawal, and the participant will not receive a refund. There will be no refunds given to those who withdraw from the program after October 15, 2021.

**Directions to the Marshall Center:**

Class will be held at the Marshall Center Building, 8800 Courthouse Road. Take Route 208 toward Spotsylvania Courthouse to Courthouse bypass. Turn left at the first traffic light on the bypass toward Rt. 208 Business. You will reach a traffic light at the end of the road (Chewning’s Grocery will be on your right.) Turn left onto Courthouse Road and follow for approx. ¾ mile to the Marshall Center on your right. Turn right into the parking lot.

SPOTSYLVANIA PARKS AND RECREATION DEPARTMENT  
P.O. Box 28 Spotsylvania, Virginia 22553 (540) 507-PLAY (7529)  
[www.spotsylvania.va.us/parksandrec](http://www.spotsylvania.va.us/parksandrec)  
Leisure Activity/Class Registration Form

Please Print Legible-

First \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_ Boy \_\_\_\_\_ Girl \_\_\_\_\_

Complete Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Is this a new address or phone number? \_\_\_\_\_ Email Address \_\_\_\_\_

Primary # \_\_\_\_\_ Secondary Contact # \_\_\_\_\_ Alternate # \_\_\_\_\_

Age (where applicable) \_\_\_\_\_ Birth Date \_\_\_\_\_

Birth Certificate is (circle one): On File Enclosed (A birth certificate must accompany this form if not already on file.)

Shirt Size (if applicable) (circle one): Youth Small (6-8) Youth Medium (10-12) Youth Large (14-16)  
Adult Small (34-36) Adult Medium (38-40) Adult Large (42-44) Adult XLarge (46-48)

Medical conditions, injuries or allergies: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone \_\_\_\_\_

Class/Activity Name \_\_\_\_\_

Class/Activity Date (s) \_\_\_\_\_ Activity Number \_\_\_\_\_

Fee \$ \_\_\_\_\_ (Add \$10 if registering after the deadline date stated on front page of form)  
(\$50 Fee On All Returned Checks)

(2.75% Non-Refundable Convenience Fee Charged On ALL Credit/Debit Card Transactions)

Release of Claims: (Parent or Guardian must sign for those under age 18): I, the undersigned, do agree to indemnify and hold harmless Spotsylvania County, and the officers, employees and agents thereof, and Spotsylvania County School authorities, from any and all claims or liability, including attorney's fees and costs for any personal injury or other damage suffered as a result of participating in a program. I understand that if I withdraw from the class/program, I must do so by contacting the Spotsylvania Parks and Recreation Department by the registration deadline date stated on the front page of this form. I must follow up my verbal cancellation request with a written refund request. A 20% administrative fee will be charged on all refunds. I understand that if I withdraw from the program for any reason after the registration deadline, no refund will be available. Failure to attend a class/program does not constitute a proper withdrawal, and the participant will not receive a refund.

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_

Checks payable to "Treasurer, Spotsylvania County". (\$50 Fee On All Returned Checks)

**COVID-19 AGREEMENT (PLEASE READ CAREFULLY AND INITIAL):**

Activities will resume under guidance from the Commonwealth of Virginia and Spotsylvania County officials. Please note that classes, programs, facility rentals, special events and sports may be delayed, postponed, or cancelled if at any time new guidance is issued at the state or local level regarding the COVID-19 virus. \_\_\_\_\_ (primary guardian initials)

I understand that the above listed participant will not be able to participate if they are experiencing any of the following: cough, shortness of breath, fever or chills, sore throat, muscle aches, headache, or new loss of smell or taste. \_\_\_\_\_ (primary guardian initials)