



## SCENE PAINTING & SCENE DESIGN

4630 Merchant's Park Circle, Suite 737, Collierville, TN 38017 (901) 853-9669

### **PAINT THE TOWN RED**

#### **SCENE PAINTING WORKSHOP**

**6 Sessions \$200 (Materials Fee \$25)**

Open to ages 10 and up (yes, parents that includes you, too!) This workshop is designed to help students get started in Scenic Painting. It will involve mixing paint colors, basic paint application and using a variety of textures and designs to represent outdoor scenes and simple interior scenes for the stage. It will consist of 6- 2 hour sessions over a 3 week period.

### **YOUR POINT OF VIEW**

#### **SCENIC/STAGE DESIGN**

**6 Sessions \$200 (Materials list will be provided prior to class)**

Open to ages 12 and up (yes, parents that includes you, too!) This class will help students begin to get designs for stage on paper and in virtual displays in a way that directors, actors, and those helping with the set will understand what is needed. It introduces plans, elevations, isometric drawings and the use of Google Sketch-up to create a virtual 3-D model of the designer's ideas. It will consist of 6- 2 hour sessions over a 3 week period.

To get the most from this workshop: It is recommended (but not required) that students bring a laptop already loaded with Google Sketch-up (free download) and that students will familiarize themselves with the software prior to first class. This class will require a few basic drawing materials; list will be provided prior to first class.

**REGISTER FOR BOTH SESSIONS \$350 (\$50 savings)**

### **REGISTRATION FORM**

Participant's Name \_\_\_\_\_ Preferred Name \_\_\_\_\_  
Home Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_

Sessions	Sessions
<input type="checkbox"/> <b>PAINT THE TOWN RED SCENE PAINTING 5:00--7:00 September 14,15, 22, 23, 28, 29</b>	<input type="checkbox"/> <b>YOUR POINT OF VIEW SCENE DESIGN 7:00--9:00 September 14,15, 22, 23, 28, 29</b>



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AGE \_\_\_\_\_ Date of Birth \_\_\_\_\_ School \_\_\_\_\_ Grade in Fall \_\_\_\_\_

Mother's Name \_\_\_\_\_ Daytime phone (mom) \_\_\_\_\_

Father's Name \_\_\_\_\_ Daytime phone (dad) \_\_\_\_\_

Cell phone (mom) \_\_\_\_\_ Cell phone (dad) \_\_\_\_\_

In the event that a parent cannot be reached, please call:

NAME \_\_\_\_\_ Phone \_\_\_\_\_

Can the above person give permission for treatment? (circle one) YES NO

Preferred Hospital: \_\_\_\_\_

Please list any special dietary restrictions, physical restrictions, or health problems, including allergies, that we should be aware of \_\_\_\_\_

I affirm that, except as noted above, my child is in good health and able to participate in all activities. YES NO

With the understanding that safety standards will be met, I release New Day Children's Theatre from possible claims for injury to person or property, which may arise from participation in all activities, and hereby agree to hold harmless New Day Children's Theatre, its employees, agents, or representatives from any claim, liability, or expense arising out of or in any way connected with any alleged incident or injury resulting from such participation. YES NO

In the event of a medical emergency, if parent or emergency contact is not available, I give the Camp Director permission to transport myself or my child to a medical facility. I further give permission for the Director to seek any and all emergency medical treatment needed.

\*I have read and understand the summer policies outlined in this brochure. YES NO

\*May we include you or your child's name and/or photograph in our advertising? YES NO

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

