YOUNG ARTIST’S WORKSHOP
Fall 2017

Do you love art? Are you between the ages of 5 and 18 years old? Sign up for the YOUNG ARTIST’S WORKSHOP today!

The following classes will be offered during the fall semester, starting Friday, September 29th, 2017:

- **Ages 5-7yrs:** Drawing, Painting, and More (2 sections)
- **Ages 8-9yrs:** Drawing, Painting, and Mixed Media
- **Ages 10-12yrs:** Drawing, Painting, and Ceramics
- **Ages 13-18yrs:** Drawing, Printmaking, and Mixed Media

Where: McMaster Building, USC Campus,
Located at the corner of Pickens St. and Senate St. downtown Columbia, SC

When: Fridays 4:00-5:30 PM, September 29th- November 17th, 2017
*We will not meet Friday, Oct. 20th, 2017 due to USC’s Fall Break.

Cost: $70.00 per student
$60.00 per student (if parent is USC faculty, staff, or student)

****IN ORDER TO RECEIVE THE DISCOUNT RATE, YOU MUST PROVIDE A PHOTOCOPY ********
OF YOUR USC IDENTIFICATION CARD AT THE TIME OF PAYMENT.

For more information please email: Daisy Shampy, Y.A.W. Coordinator, yaw.usc@gmail.com

Application Deadline: Wednesday, September 27th, 2017

Directions:

Students attending the Young Artist’s Workshop should be brought to the front entrance of the McMaster College of Art (Pickens St. side, indicated by the arrow on map), on The USC campus between 3:45 and 4:00 PM. Metered parking is available along Senate and Pickens Streets, please be aware that parking is limited. Students will be greeted by his or her instructor on the second floor of McMaster and escorted to his or her class at the appropriate time. If you should arrive after 4:00 PM, with your child’s safety in mind, please escort your child to the his or her assigned classroom. Also, if you are running late for drop off or pick up please notify the Director, Dr Minuette Floyd, or the Coordinator, Daisy Shampy. PLEASE REMIND YOUR YOUNG ARTIST TO DRESS FOR MESS! Students ages 5-9 will be dismissed from his or her classroom each Friday. Parents must pick up their child from the classroom. All other students will be escorted to the front entrance of McMaster College at 5:30 PM to await your arrival.
Young Artists Workshop Dates
FALL 2017

Fridays 4:00 pm – 5:30 pm

September 29th: First Y.A.W.

October 6th: Second Y.A.W.
October 13th: Third Y.A.W.
October 20th we will not meet due to USC’s Fall Break
October 27th: Fourth Y.A.W.

November 3rd: Fifth Y.A.W.
November 10th: Sixth Y.A.W.
November 17th: Final YAW Reception and Exhibition

__________________________________________________________________________

Teachers and Classes:

**Ages 5-7yrs:**  
*Drawing, Painting, and More*  
Section 1: Ms. Elise Bradfute  
Ms. Brynna Coella

Section 2: Ms. Hannah Singley  
Ms. Carrie Laird

**Ages 8-9yrs:**  
*Drawing, Painting, and Mixed Media*  
Mr. Wesley Jeffries  
Ms. Megan Stoltenberg

**Ages 10-12yrs:**  
*Drawing, Painting, and Ceramics*  
Ms. Lindsey Herbert  
Mr. Andrew West

**Ages 13-18yrs:**  
*Drawing, Printmaking, and Mixed Media*  
Mrs. Bobbi Leavens
Y.A.W. Application Form

Name of Child: ___________________________________________  Age:_______

____________________________________________________________________

_________________________________________  Age:_______

____________________________________________________________________

_________________________________________  Age:________

Name of Parent(s) or Guardian(s): ________________________________

Address: __________________________________________________________

Telephone Numbers:           Email Address: __________________________

Home:______________  _____Yes, please add me to email list.

Work:______________

Cell:______________

Please select, from below, the Workshop your child wishes to attend.  *Please note that if you are enrolling more than one student, please write the name of the child next to the class he or she will be attending.  Thank you.

_______Ages 5-7yrs:  Drawing, Painting, and More (2 sections)

_______Ages 8-9yrs:  Drawing, Painting, and Mixed Media

_______Ages 10-12yrs: Drawing, Painting, and Ceramics

_______Ages 13-18yrs: Drawing, Printmaking, and Mixed Media

Enclosed Fee:__________ Check Number:_______

If affiliated with The USC please check one of the following:  ___Staff,  ___Faculty,  ____Student

Medical Information

Tetanus Shot:  ___ Yes  ___ No  Effective Date:_____________________

In case of emergency notify:
  1. Name: ____________________________  Telephone Number: ______________
  2. Name: ____________________________  Telephone Number: ______________

Family Doctor/ Pediatrician: ____________________________  Telephone Number: __________________

Please indicate what allergies your child may have, type of reaction when exposed, and what action needs to be taken in the instance an allergic reaction occurs.

Allergies: __________________________________________________________

____________________________________________________________________

____________________________________________________________________

If there is any additional information that you wish to disclose in regards to your child please explain below.

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________
Sign In/ Pick up Information

Please indicate below if any persons other than yourself will be dropping off or picking up your child.

Name:_____________________________ Relationship:______________________
Name:_____________________________ Relationship:______________________
Name:_____________________________ Relationship:______________________

_______ No one is authorized to pick up my child other than myself, spouse, or guardian.

Please note:

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Permission/ Release Form

I hereby certify that I am the parent or guardian of ____________________, and give Dr. Minuette Floyd, Professor of Art Education at the University of South Carolina, the right and permission to publish in print or electronically photographs or video footage of my child and/or artwork taken during the Young Artist workshop at the University of South Carolina, as well as writings and artwork by the student named above. Photographs of your child may be used on the USC webpage (Y.A.W. link), Y.A.W. Facebook Page, and for educational purposes only.

I understand that the student will be identified by his or her first name only.

Parent Signature:________________________________________
Date:________________________
Please Mail Application to:

YOUNG ARTIST'S WORKSHOP
Attention: Daisy Shampy
School of Visual Art and Design
University of South Carolina
Columbia, SC 29208

Please make checks payable to: USC Art Fund, THERE WILL BE NO REFUNDS.

All fees are due before Friday, September 27th, 2018.

Please write your email address below if you would like to be added to our mailing list to receive updates and reminders about the Young Artist’s Workshop program.

Email Address: ____________________________

If you have any further questions please do not hesitate to email yaw.usc@gmail.com.

____________________________________________________________
To be filled out by Coordinator:

Class: _________
Age: __________
Fee: __________
Check Number: _______