



Los Angeles
Academy of Figurative Art

Summer Art Program 2019

Select a Session:

- Session 1: July 8th - July 19th
 Session 2: July 22nd - August 2nd
 Both Session 1 and 2

Personal Information:

Last Name: _____ First Name: _____

Birthdate: _____

Phone Number 1: _____ Phone Number 2: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

High School: _____

College (if applicable): _____

Parent: _____

Payment Information:

You may call (818) 708-9232 to make your payment. You may also pay online by clicking on the links provided on: <http://laafa.org/summer-art-program/>.

Additional Information:

- Students under the age of 18 years old enrolling in the Summer Art Program must submit a Parent Consent Form.
- Students who only want to attend Session 2 of the Summer Art Program must submit 2 life drawings to be approved to take Session 2.

Submission:

- Fax: (818) 475 -1964
- Email: receptionist@laafa.org
- Mail to: Los Angeles Academy of Figurative Art, 16926 Saticoy Street, Van Nuys, CA 91406

Important Note: For out-of-town students, please refrain from making travel arrangements and accommodations until confirmation of the program is given. The Summer Art Program is subject to cancellation if minimum enrollment is not met. The Summer Art Program is non-refundable unless it is cancelled by LAAFA. You may request to drop for credit or transfer into another class.



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Parental Consent Form

By signing this document below, I hereby permit my son/daughter/ward,

_____ (Please print Student's name), to attend a professional drawing/painting/sculpting class at LAAFA (Los Angeles Academy of Figurative Art); in which he/she may be required to draw/paint/sculpt from a live model (clothed or nude), as a major part of his/her education. I also understand that nude models may be present in other classes at this time, perhaps viewable by my child, and art work depicting the nude form is places in full view throughout the premises.

Print Name: _____

Signature: _____

Date: _____



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PERMISSION FOR PHOTOGRAPHY/VIDEOGRAPHY

For valuable consideration received, I grant the Los Angeles Academy of Figurative Art – LAAFA (Company) the absolute and irrevocable rights and unrestricted permission concerning any photographs/videos/audio recordings that it has taken or may take of me or in which I may be included with others, to use, reuse, publish, and republish the photographs/videos/audio recordings in the whole or in part, individually or in any purpose whatsoever, specifically including illustration, promotion, art, editorial, advertising, and trade without restriction as to alteration; and to use my name in connection with any use if it chooses. I release and discharge the Company from any and all claims and demands that may arise out of or in connection with the use of the photographs/video/audio recordings, including without limitation any and all claims for libel or violation of any right for publicity or privacy. This authorization and release shall also inure to the benefit or the heirs, legal representatives, licensees and assigns of the Company. I am a legally competent adult and have the right to contract in my own name. I have read this document and fully understand its contents. This release shall be binding upon me and my heirs, legal representatives, and assigns.

X

Signature

Print Name

Street Address

City, State, and ZIP

Contact Number or Email

Date