



2016 Art Workshop Experience

AWE Summer Application

Art Workshop Experience
54 Pearl Street DUMBO
Brooklyn, New York 11201
artworkshopexperience.com

917.302.8586 • www.artworkshopexperience.com

You MUST email or call ahead to reserve a spot. Some weeks fill up early, especially Sessions 2, 3, 4 and 5. To assure enrollment, please call or email your sessions request first before tuition payment.

- 9 to 18 years of age. AWE is for the focused artist who wants to make art for at least a week!
- Classes start from 9 am to 3 pm, Monday through Friday.
- Bring a Lunch. Lunch is at the Borough Bridge Park (weather permitting) or under the Manhattan Bridge Arch. The park is sandwiched between the Brooklyn and Manhattan Bridges. It's one block from the AWE studio.
- AWE provides a subway chaperone back to the 7th Avenue Stop on the F line in Park Slope. This complimentary service is for students who live in that area who need a chaperone. It does not include subway fare. Students must have a metro card when riding the subway.
- AfterAWE is from 3 pm up to 6 pm. Students can continue to work on existing projects or start new ones. AfterAWE is helpful to those who can't pick up their children by 3 pm. AfterAWE is \$18 per hour. Billing is done by the quarter hour.

- _____ Session 1: July 5 - 8 • \$388 (art materials fee included). 4 Day Week. AWE is closed on Monday, July 4.
- _____ Session 2: July 11-15 • \$485 (art materials fee included. Teen priority until April).
- _____ Session 3: July 18-22 • \$485 (art materials fee included. Teen priority until April).
- _____ Session 4: July 25-29 • \$485 (art materials fee included. Teen priority until April).
- _____ Session 5: August 1-5 • \$485 (art materials fee included).
- _____ Session 6: August 8-12 • \$485 (art materials fee included).

_____ Student First name _____ Last name

_____ Age (must be 9 or older) _____ Yes _____ No
I give permission to have my child and/or my child's art photographed for the AWE website.

_____ Address _____

_____ City _____ State / Province / Region _____ Postal / Zip Code _____ Country _____

_____ Parent and/or Guardian First Name _____ Last Name _____

_____ Email _____ Phone Number _____

_____ Known Allergies / Medical Concerns _____ Emergency Contact Number _____

_____ \$100 Deposit (partial tuition payment)

_____ \$485 (1 Week)	_____ \$970 (2 Weeks)	_____ \$1,455 (3 Weeks)	_____ Another Amount
_____ \$388 (1 Session)	_____ \$873 (Session 1+ 1 Week)	_____ \$1,358 (Session 1+ 2 Weeks)	