



Grand Forks Film-making Workshop Application For Students Ages 12-18

July 27-31, 2009, 10:00 a.m. to 4:00 p.m., location to be announced

Instructors: Jim Kambeitz and Angie Swiec

Applicant name _____ Age _____ Birth date _____

Address _____ City, State, Zip _____

Telephone _____ email address _____

Parent/Guardian name (if under 18 years old) _____

Do you have a disability*? Yes No

If yes, please describe any accomodation needed _____

Do you have any dietary restrictions? Yes No If yes, please describe _____

Lunch options (please check one): \$7.00 a day for a provided lunch and two snacks

Will bring own lunch and snacks (healthy foods only, please)

Do you have transportation? Yes No

Please write 2-3 sentences explaining why you are interested in this workshop and what you hope to learn from it:

Applicant signature _____

Parent/Guardian signature (if under 18) _____

*The definition of "disability" is broad and can be physical, mental, emotional, or "hidden". Conditions such as asthma, chronic allergies, diabetes, heart disease, cancer, and cystic fibrosis are examples of hidden disabilities.

VSA arts: Creating a society where people with disabilities can learn through, participate in, and enjoy the arts. Art Venture is a VSA affiliated program managed by Dakota West Arts Council. This film-making workshop is "inclusive", meaning people with and without disabilities will participate together.

**Return this form by email to linda@dakotawest.org
or USPS mail to Dakota West Arts Council, P.O. Box 606, Bismarck, ND 58502.**