

TEENS WORKSHOPS SUMMER 2020 Registration Package

Thank you for your interest in Teens Workshops with Continuing Studies at Emily Carr! Workshops are open to students ages 15-18 with an interest in art. No experience is required.

Registration is on a first-come, first-serve basis and will open on **May 22, 2020.** Register early as space is limited. Registration packages will be available online at http://www.teens.ecuad.ca/.

Please be sure to submit your payment in full and to complete **all of the forms in this package** to ensure your registration can be processed. **PAYMENT** must be paid in full **at the time of registration.**

ECU's Withdrawal and Refund Policy:

Refunds or tuition waivers, minus an administrative charge of \$35 per course, will be given if notification of withdrawal is received seven or more calendar days before the start of the course. No refund will be given if notification of withdrawal is received less than seven full calendar days before the start of the course. Exceptions are only considered as they pertain to extenuating circumstances on an individual basis. In such cases, a written request for refund, accompanied by appropriate documentation from a third party (e.g. subpoena), must be submitted. Students may withdraw from a course by phone, fax, or email. Under no circumstances will refunds be granted for requests received after course completion.

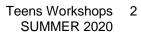
For assistance with registration, please contact us at csreghelp@ecuad.ca or call 604 844 3810.

Registration Checklist

\square Appendix A Student Information, Application and Payment Information
□ Appendix B Code of Conduct Form
☐ Appendix C Artwork Release (Minors)

How to Submit Your Registration Package

- 1 By email to csreghelp@ecuad.ca
- 2 By fax to 604 630 4535. (not available at the moment)
- In person or by mail to:
 Continuing Studies, Emily Carr University of Art + Design,
 520 East 1st Avenue, Vancouver, BC, V5T 0H2. (not available at the moment)





WORKSHOP SELECTION AND FEES

Graphic Novel Weekend Intensive:				
☐ CETP 220 SU01 (10am-4:30pm) \$254 2 sessions Sat-Sun Jun 6 + Jun 7				
This intensive workshop focuses on the production fundamentals of dynamic graphic novels, such as story boarding, character development, and narrative dialogue. Building off of students' individual illustration and drawing styles, the Graphic Novel Weekend Intensive will help students transform their ideas and sketches into fully-realized/completed engaging graphic stories. This workshop will include in-class discussions and critiques to strengthen individual art, design and communication skills.				
DIY Printmaking for Teens:				
☐ CETP 223 SU01 (9am-12pm) \$254 4 sessions Mon-Thur July 20 - 23				
Unleash your creativity through versatile DIY printmaking techniques. In this exciting workshop, you will explore monotype printing, trace prints, paper alterations, rubbings, and alternative relief techniques. Approaches will range from printing found objects, from one's home or immediate surroundings, to direct transfer prints. Discover the many ways printmaking intersects with other creative practices by combining these printmaking approaches with drawing or photography. By the end of the program, you will have developed unique prints for your portfolio.				
Tapestry Weaving for Teens:				
☐ CETP 228 SU01 (9am-12pm) \$254 4 sessions Mon-Thur July 27 - 30				
Learn how to hand-weave your own tapestry on a frame loom. This hands-on workshop will introduce you to the art of woven tapestry. You will learn fundamental weaving techniques, from selecting the materials to building a frame loom, and creating woven designs. You will explore various techniques of plain weave, slit tapestry, hatching, shape-building, and knotting, as well as finishing techniques. By the end of the program, you will have developed an awareness of the creative potential of tapestry and textile arts.				



STUDENT INFORMATION: APPENDIX A

STUDENT INFORMATION									
FAMILY/LAST NAME			GIVEN/FIRST NAME (IN FUI	LL)		NICKNAME/ PREFERRED NAME			
STREET NAME AND ADDRESS									
CITY	PROVINCE			COUNTRY	(POSTAL/ZIP CODE			
EVENING OR HOME PHON	E (AREA CODE + NUMBER)	<u>.</u>	DAY PHONE (AREA CODE +	NUMBER)		EMAIL			
PRIMARY LANGUAGE:		SH OTHER: PLEASE SPECIFY			□Female r □Prefer not to say	BIRTH DATE: YEAR (YY) MONTH(MM)			DAY(DD)
CITIZENSHIP: YOU MUST CHECK ONE OF THE FOLLOWING: CANADIAN CITIZEN LANDED IMMIGRANT/PERMANENT RESIDENT Landed immigrants/permanent residents of Canada must submit a copy of their immigration form.				nt residents of Canada must	☐INTERNATIONAL: PLEASE SPECIFY COUNTRY BELOW				
PARENT/GUAR	DIAN CONTACT INF	ORMATION							
FAMILY/LAST NAME			GIVEN/FIRST NAME (IN FULI	L)		RELATIONSHIP TO STUDENT			
CELL PHONE (AREA CODE	+ NUMBER)		EVENING OR HOME PHONE	(AREA COD	E + NUMBER)	WORK PHONE (AREA	CODE + NUMBER	1)	
STREET NAME AND ADDRI	ESS								
CITY		PROVINCE/STATE	COUNTRY		POSTAL/ZIP CODE				
EMAIL ADDRESS (NOTE: THIS WILL BE THE PRIMARY METHOD OF COMMUNICATION			FOR THE PROGRAM) CUSTODY ARRANGEMENT DETAILS OR CONDITIONS:						
ALTERNATE EMERGENCY CONTACT INFORMATION									
FAMILY/LAST NAME GIV			GIVEN/FIRST NAME (IN FULL)		RELATIONSHIP TO STUDENT				
EVENING OR HOME PHONE (AREA CODE + NUMBER)			CELL PHONE (AREA CODE + NUMBER)			WORK PHONE (AREA CODE + NUMBER)			
STREET NAME AND ADDRI	ESS					I			
CITY		PROVINCE/STATE			COUNTRY	POSTAL/ZIP CODE			
BC CARE CARD # / HEALTH CARE PLAN #									
IMPORTANT PROGRAM INFORMATION									
If you have any functional limitations, including but not restricted to physical, cognitive and/or mental health impairments, that may interfere with your capacity to be safe or participate fully in the teaching and learning environment, please contact Accessibility Services directly at accessibility@ecuad.ca prior to classes starting. They can work with you to set up accommodations and supports at the University. Contact Accessibility Services at: 604 844 3081 accessibility@ecuad.ca http://connect.ecuad.ca/studentservices/accessibility									
SECONDARY (HIGH SCHOOL) INFORMATION									
NAME OF HIGH SCHOOL	IAME OF HIGH SCHOOL ART TEACHER				CITY GRADE			E	
Have you ever applied for admission to or taken a course at Emily Carr University? If yes, please provide your student identity number. STUDENT IDENTIY NUMBER (IF APPLICABLE)									



STUDENT INFORMATION: APPENDIX A

PAYMENT METHOD: UNISA/MASTERCARD Online Banking (Canadian Institution) For payment by credit card, please call Continuing Studies Registration at 604-844-3810. Unfortunately, we will no longeredit card payment via forms. For payment by online banking, once your application is received, we will process it and send you an email with online instructions. Your registration will be conditional until we then receive a screenshot confirmation of an online banking payon and the first payon of the program of the programs of the programs this year, students participating in Teens Workshow the program of the programs this year, students participating in Teens Workshow the program of the programs this year, students participating in Teens Workshow the program of the program. I consent to the release of medical information as required in the event of injury or other medical emergency. I consent to and authorize emergency medical and/or dental treatment during my child's involvement in the program. I give my child permission to depart for home at the end of the program unaccompanied. I consent to the collection, use and disclosure of my information and my child's involvement in the program. I consent to the collection, use and disclosure of my information and my child's information as described below. Emily Carr University of Art and Design gathers and maintains information used for the purposes of admissions, registration and other fundamental activities related to being a member of and attending a public post-secondary institution in the province of British Columbia. All applicants are advised that both the information they provide and any other information placed into the student record will be protected and color more with the EC Freedom of Information and Privacy Protection Act (1992).	
For payment by online banking, once your application is received, we will process it and send you an email with online instructions. Your registration will be conditional until we then receive a screenshot confirmation of an online banking particular of the program of the program. PLEASE INITIAL EACH STATEMENTBELOW I consent to the release of medical information as required in the event of injury or other medical emergency. I consent to and authorize emergency medical and/or dental treatment during my child's involvement in the program. I give my child permission to depart for home at the end of the program unaccompanied. I consent to and authorize emergency medical and/or dental treatment during my child's involvement in the program. I consent to the collection, use and disclosure of my information and my child's information as described below. Emily Carr University of Art and Design gathers and maintains information used for the purposes of admissions, registration and other fundamental activities related to being a member of and attending a public post-secondary institution in the province of British Columbia. All applicants are advised that both the information they provide	
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In the event of an emergency, I authorize program staff to secure any licensed hospital, physician armedical personnel for any treatment deemed necessary for my child's immediate care. I certify that is covered by medical insurance for the duration of the program.	
I understand and agree that the program instructors and administrators may collect, use and disclos personal information about students and their guardians for the purposes of administering, delivering evaluating the program. We may also use this information to notify you about future programs that n interest to you. Additional information about our privacy policies and practices can be found at www.connect.ecuad.ca/about/privacy.	g and
I, the undersigned, have read this Consent Form and understand all its terms. I execute it voluntarily with full knowledge of its significance.	y and
IN WITNESS WHEREOF, I have executed this Consent Form at the City of, on the year first above-written.	day and
(signed by Parent or Guardian OR student if 18 or older)	



APPENDIX	B CODE	OF CONDI	ICT
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Student Name (p	(printed in full):	
	(1)	

Please read through the following agreement with your child. Both of you are required to sign.

While creative, artistic and intellectual expression is encouraged and promoted, it is also expected that we conduct ourselves in a manner that is safe and respectful of our Emily Carr community. This code of conduct requires all students, parent/guardians of students, instructors, guests and employees to:

- Refrain from words, actions and behavior in any medium that demonstrate disrespect for other students, instructors, guests and employees, or the family members of such individuals
- Respect other students, instructors, guests and employees right to privacy and the confidentiality of their personal information
- Act with honesty and integrity when dealing with property, monies, equipment and any other assets belonging to Emily Carr University of Art + Design.
- Act safely and respectfully for the duration of the program, to ensure a positive experience for all.
- Respect and abide by the laws of Canada and British Columbia.
- Treat students, instructors, guests and employees fairly, knowing that Emily Carr University
 of Art + Design does not tolerate unlawful discrimination on the basis of race, national or
 ethnic origin, citizenship, colour, religion, sex, age, mental or physical ability, political beliefs,
 socio-economic status, health related status, sexual orientation, marital status, or any other
 grounds enumerated in the human rights legislation of the jurisdiction in which the individuals
 involved are located.

I understand that the use of alcohol, non-prescription drugs, inappropriate behavior and offensive language are prohibited. Should I be registered in the accommodation option of the program, I understand that I will be required to abide by the posted curfew times.

I understand that Emily Carr University of Art + Design reserves the right to take action regarding any breach of the Code of Conduct, including but not limited to a non-refundable removal from the program.

By signing below, you agree to the Code of Conduct.

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In addition, I hereby certify that I am over eighteen (18) years of age or have obtained the written consent of my legal parent/guardian below.

Doront/Cuardian

Student	Parent/Guardian
Signature	Signature
Date	Date



APPENDIX C: ARTWORK(S) AND VIDEO CONSENT FORM (MINORS)

Student Name (printed in full):	

As a student attending a workshop offered by Emily Carr University of Art + Design ("ECUAD"), I understand that ECUAD may wish to take photographs or videos of me during my attendance at the Program or make other uses of the artwork I create in the Program for the purposes of the Program, and for:

- Artistic Display,
- Use in Academic Programs,
- Advertising or Marketing ECUAD and its Programs and Services
- Recruiting Staff or Students to ECUAD; and
- Other related purposes.

I consent to ECUAD, and its directors, officers, employees, contractors and authorized agents (the "Personnel") creating, using and editing my photograph, portrait, video tape or electronic images, recordings or other reproductions or representations of my likeness, including my voice and statements (collectively "My Likeness"), for the purposes described in this Consent, and to the use of My Likeness for the purposes described in this Consent in any publication, display, broadcast, webcast or other exhibit, theatrically or otherwise. I also confirm that I have not given anyone the exclusive right to use my Likeness.

I also acknowledge that ECUAD considers any photographs or videos of me taken during the Program to be its exclusive property and it does not recognize any legal interest that I may have in them except as set out herein. I further understand that I will not have the opportunity or right to inspect or approve the publications or promotional materials, including written or electronic copy, in which My Likeness may appear.

In addition, I consent to the use, display or publication by ECUAD of any art or other work(s) I produce during the Program (the "Artwork") for the purposes described in this Consent, including the use, display or reproduction of the Artwork within programs brochures or catalogues, art exhibitions, broadcast, webcast, or publications, or other exhibit, display, or publication.

I understand that ECUAD has no plans to compensate me for the use, publication, or display of the Artwork or My Likeness whether or not ECUAD generates any income or revenue from such use, publication or display or I suffer any loss or damage resulting from such use, publication or display.

I confirm that I am signing this Consent freely and voluntarily, and in executing this Consent do not rely on any inducements, promises, or representations made by ECUAD or its Personnel. If any part or provision in this Consent is found to be unenforceable, then the remainder of the Consent shall continue to be enforceable.

By signing below, I understanding that I am consenting to the use, display and publication of My Likeness and the Artwork as described above.

Student	Parent/Guardian
Signature	_ Signature
Date	_ Date