

Cedar Key Arts Center Announces
Patty Jett Elementary Summer Art Program 2026
(Available to upcoming 1st through 5th graders)
Dates: July 20 – July 31, 2026
Theme for 2026: Dali, Van Gogh, Picasso “Oh My”

****Please complete all blanks and submit the application with the \$50 material fee. The application will be returned if not 100% complete.**

Scholarships are provided through CKAC and its supporters and are available in part or total but must be approved ahead of time. Please contact Deb Mann at (727) 492-3957 for more information.

Grades 1st- 5th will meet 9:00 am – 11:00 am.

ENROLLMENT is limited to 20 for elementary, so return your form today.

The deadline for registration is June 26, 2026. Date Received: _____

Student Name _____

Grade _____ (next school year) Age _____ Birthdate _____

Parent/s or Legal Guardian's Name/s _____

Street Address _____

Mailing Address _____

Email Address _____

Phone Number _____ Cell Phone _____

Emergency Contact (Relationship) _____ Phone _____

Consent Agreement

I agree that my child is to maintain behavior accordance with CKAC Code of Conduct. In case of emergency, please contact a parent, if possible, then emergency services, or seek prompt medical attention immediately if necessary.

Parent/Guardian Signature _____ Date: _____

Medical Information for: _____

Child's Name

List any allergies: _____

Medications and Medical conditions we need to be aware of: _____

Doctor's Name: _____ **Doctor Phone Number:** _____

Insurance Company: _____

I agree to be financially responsible for any medical treatment deemed necessary by the child's doctor or qualified medical personnel if I cannot be reached during an emergency.

SIGNATURE: _____ **Date:** _____

___ **My child will be picked up by:** _____

___ **My child can walk/ride bike home unaccompanied.**

Other transportation information: _____

PERMISSION TO PHOTOGRAPH

Place a checkmark or X in the YES box next to each action for which you are granting permission. Place a checkmark or X in the NO box next to any action for which you are NOT granting permission.

YES	NO	Description of Action
		For the above-named child to be photographed by or on behalf of the Cedar Key Arts Center (CKAC) for a slide show to be shown at Cedar Key Arts Center functions.
		For the above-named child to be photographed by or on behalf of the Cedar Key Arts Center (CKAC) for news articles.
		For the above-named child to be photographed by or on behalf of the Cedar Key Arts Center (CKAC) for use on CKAC website and/or Facebook if no name is used.
		The Cedar Key Arts Center (CKAC) has my permission to use, copy, reproduce, and display the artwork in connection with promotional activities for CKAC worldwide in all forms of advertising, direct mail, exhibitions, and classroom presentations.

Parent /Guardian Signature: _____ Date: _____

___ I would like to volunteer to assist at art camp: _____
Day/Days

Please return this registration/application to one of the following locations ASAP.

- Drop off at Cedar Key Keyhole, 457 2nd Street, Cedar Key
- Mail to Cedar Key Arts Center, P.O. Box 949, Cedar Key, FL 32625
- Drop off at Cedar Key School Front Office

Please make checks payable to Cedar Key Arts Center.

For questions or further information please contact:

- Dawn Callahan, (812) 345-1701, or dncallahan81@gmail.com

- Deb Mann, (727) 492-3957 (text or call), or dobbin22@hotmail.com