

Egg Artistry 101

Diana Macias, longtime member of the “Northern California’s Egg Artists” and the “International Egg Art Guild”, has been creating egg art for over 20 years. She has been featured on many local television programs as well and local and national newspapers.



2019 Schedule: January 12, February 9, March 16, April 27, May 18, June 15, July 20, August 24, September 21, October 19, November 16, December 14

Where: Fairsite Classroom #18
902 Caroline Avenue, Galt CA 95632

Time: **Beginners:** 10:00 a.m. – 1:00 p.m.

Advanced: 10:00 a.m. – 3:00 p.m.

Fee: \$7.50 per month (additional fee for supplies depending on project selected)

Please contact Diana by email at leggantdesigns@frontiernet.net or call her at (916) 687-8721 regarding the necessary tools or supplies needed.

Seminars will focus on beginning techniques used to create an egg art project using real eggshells. Each month new techniques will be introduced to create a new project. Students will discover that any experience they have in crafts, beading, painting, needlework or other art media can be successfully incorporated into egg art.

ADULT/CHILD PARTICIPANT AGREEMENT

PARTICIPANT NAME _____

PARENT/GUARDIAN NAME _____ AGE ____ BIRTH DATE _____

ADDRESS _____ CITY _____

HOME PHONE _____ WORK PHONE _____

E-MAIL ADDRESS: _____

CLASS/ACTIVITY/SPORT _____

I agree, and/or give permission for my child (“Participant”), to participate in the above mentioned activity, sport or class sponsored by the City of Galt Department of Parks and Recreation (“Department”). I understand and agree, on behalf of the Participant and myself as parent/guardian, to abide by the rules and regulations of the Galt Parks & Recreation Commission and the Department in the recreational activities mentioned above.

I understand that there are inherent risks in this activity, sport or class and that the City shall not provide insurance. Therefore, I agree, as Participant, or on behalf of the Participant as parent/guardian, to save, keep and hold harmless the City, its officers, agents, employees and volunteers from all claims, demands, suits, causes of action, proceedings, damages, injuries, losses and liabilities of any kind, including, without limitation, bodily injury, in law or equity, resulting from or in any way arising out of or related to the Participant’s participation in this activity, sport or class. Further, I agree that the City will not be held liable for any accident, loss or damage, including, without limitation, bodily injury, to the Participant while participating in this activity, sport or class.

This Participant Agreement shall be considered effective as of the date and time filed with the Department.

Refund requests will not be honored if it has been more than 90 days since registration and/or if the class/activity has begun. For every refund request that is processed, your amount will be reduced by \$17.00 for the service fee.

PARENT/GUARDIAN/PARTICIPANT SIGNATURE _____

DATE _____