



## Summer Film & Media Art Institute 2010

New Vision Partners will be providing a month long Film and Media Arts Institute for middle and high school students. Students will be working in teams to make a short film, produce a radio show, publish a magazine, or produce a CD of their original work. Their work will be informed by morning workshops on personal, communal, and global issues. Youth in our program will work hand in hand with skilled instructors and counselors, receive special guests in the various industries, and go on fun field trips on Fridays. At the end of the program, we will hold a special showcase of work accomplished during the summer.

**Space is limited. Complete the application below to enroll in the program. Please return by June 4<sup>th</sup> to New Vision Partners, CORAL Center 2750 E. New York Drive, Pasadena, CA 91107 or via email at [nyi@newvisionpartners.org](mailto:nyi@newvisionpartners.org) or fax to 626.798.0758.**

Student's Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

School \_\_\_\_\_ Current Grade \_\_\_\_\_

PRINT Parent/Guardian's Name \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Work Phone Number \_\_\_\_\_

Cellular Number \_\_\_\_\_ email \_\_\_\_\_

Do you know about....	No	Yes, Beginner	Yes, Intermediate	Yes, Advanced	Comment (what have you produced, published, performed in any given area)
iMovie					
Final Cut Express					
Final Cut Pro					
video camera					
Singing					
Acting					
Dancing					
Writing					
Garage band					

What program are you interested in? (there are space limitations in each program so please rate your 1<sup>st</sup> 2<sup>nd</sup> and 3<sup>rd</sup> choice...

- \_\_\_\_\_ Music Production (Singing, songwriting, play instrument, rapping, producing beats)
- \_\_\_\_\_ Graphic Design and Magazine publishing (photojournalism, animation, writing)
- \_\_\_\_\_ Radio Production (writing, broadcast journalism, vocal recording, script development, editing)
- \_\_\_\_\_ Film Production (acting, developing storyboards, filming, editing)

Why are you interested in the Film and Media Arts program?

If you were to make a documentary, what topic/issue would you chose and why?

Why should we chose you to be a part of the institute?

**Emergency Contact Info**

Doctor's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

List any known allergies or medications that MUST be taken:

\_\_\_\_\_

List any known medical condition that a doctor should know about in case of injury or accident:

\_\_\_\_\_

Closest relative/friend (not living with you) that may be contacted in case the parent/guardian cannot be reached:

PRINT Name \_\_\_\_\_

Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

**(initial)\_\_\_\_\_ WALK HOME RELEASE** I give my child permission to walk home after the program.

**(initial)\_\_\_\_\_ MEDICAL RELEASE I hereby give** \_\_\_\_\_ (student's full name) permission to participate in New Vision Partners' Summer Film & Media Art Institute 2010 and its activities at the CORAL Innovation Center, and at all the field trips, and waive all claims against New Visions Partners, Inc., and its employees, agents and chaperones for injury, accident, illness, medical/surgical diagnosis/treatment and/or hospital care which is deemed advisable by and is rendered under the general or special supervision of any physician and/or surgeon licensed under the provisions of the Medicine Practice Act, whether such diagnosis or treatment is rendered at the office of said physician or at a hospital. It is understood that this authorization is given in advance of any specific consent to any and all such diagnosis, treatment, or hospital care which aforementioned physician in the exercise of his/her best judgment may deem advisable. This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California. This authorization shall remain effective throughout the participation of my son/daughter in NVP activities.

**(initial)\_\_\_\_\_ PHOTO RELEASE** I agree to allow New Visions Partners, Inc., its employees, agents and chaperones to take and print pictures/video of my child and utilize them for promotional and grant writing purposes.

**(initial)\_\_\_\_\_ LIABILITY HOLD HARMLESS CLAUSE** I agree to hold harmless New Vision Partners, Inc, its employees, agents and chaperones against any claims, administrative or judicial, that may occur as a result of participation in its programs.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**See you this summer!**