



**Muhlenberg Arts Council's Ember Oglesby  
Arts Day Camp**

**Who can participate:** Any student interested in exploring the arts this summer and that are entering into grades 1-8 for the 2025/2026 school year.

**Dates of the event:** June 23rd-27<sup>th</sup> 2025

**Times of event:** ALL grades will be from 8:30am-12:30pm

**Location:** ALL days of camp will take place at Felix E. Martin Jr. Hall.

**Details of the Camp:** The Muhlenberg Arts Council's Arts Day Camp has been renamed permanently in memory of Ember Oglesby. Ember Oglesby was a true pursuer of the arts. She loved being involved with drama and band, but her passion extended to all the arts as a whole. She herself had the opportunity to participate in the arts camp in previous years and enjoyed every minute of it. We, as the Muhlenberg Arts Council, wanted to dedicate this event in her honor because we know how much she would have loved to participate in the event-and now she always will. The Ember Oglesby Arts Day Camp is an opportunity for students to explore the different art forms of dance, drama, music, and visual art all while having fun! We will conclude the camp with a presentation on the evening of June 27th at 6:00pm where family and friends can come to see what the participants have explored in the arts through the week. We hope you can join us for this fun filled week!

**Registration Forms:** Forms are due by June 13th. Please bring the form to MCHS or mail to: Sean Mooringham/MAC P.O Box 513 Powderly, KY 42367





## Ember Oglesby Arts Day Camp Registration Form

Dates of camp: June 23rd-27th All Grades: 8:30a-12:30p

The cost of camp is \$40 per child, \$25 for each additional sibling

Make checks payable to Muhlenberg Arts Council. Deadline for forms and money must be postmarked by June 13th

Bring this form and the attached waiver of liability to the front office of MCHS or mail to:

Sean Mooningham/MAC at P.O Box 513 Powderly, KY 42367

Camper Name: \_\_\_\_\_ Age: \_\_\_\_\_

T-Shirt Size (please circle): Youth Small Youth Medium Youth Large Youth XL Adult Small Adult Medium  
Adult Large Adult XL Adult 2XL

Mailing Address: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender: \_\_\_\_\_ Race: \_\_\_\_\_

Please put the grade that your child will be in the 2025/2026 school year

Custodial Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Please list if there is anything that you would like us to know that would better his/her experience with the arts camp \_\_\_\_\_

### Medical Information (Attach if necessary)

\_\_\_\_\_  
\_\_\_\_\_

### If I am unable to pick my child up from camp, the person listed below has my permission to do so:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

### If I am not available in an emergency please notify:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

## Photo Use Permission

I grant MAC, and persons acting through them, the right to use, reproduce, assign and/or distribute photographs, films, videotapes, and sound recordings of my minor child without compensation for use in promotion/advertising, educational publications, or electronic publishing (web site) which they may create. Children's names will not be published.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

## Acknowledgement of Risk and Waiver of Liability

Name of Child(ren) participant(s): \_\_\_\_\_

Name of adult participant/parent/legal guardian: \_\_\_\_\_

As a legal guardian of \_\_\_\_\_, I hereby consent to the above person(s) in participating in the Ember Oglesby Arts Day Camp program. I recognize that potentially severe injuries including but not limited to permanent paralysis or even death can occur during any physical activity. I also realize my child(ren) will be performing different physical activities during the Ember Oglesby Arts Day Camp program.

I understand that it is the expressed intent of the Muhlenberg Arts Council to provide for reasonable safety and protection of me/my child(ren) and in consideration for allowing me/my child(ren) to participating in the Ember Oglesby Arts Day Camp program, I hereby for myself, heirs, executors and administrators, forever release Muhlenberg Arts Council and/or Sean Mooningham, TJ Teague, its officers, board members, Camp Staff, group leaders, and all those assisting with this event from all liabilities for any and all damages and injuries suffered by me/my child(ren) while participating in this event.

I also certify that me/my child(ren) is /are and will remain covered by Adequate Accident Insurance Program covering me/my child(ren)'s participation in the Ember Oglesby Arts Day Camp. As a legal guardian of the aforementioned person(s), I hereby agree to individually provide for the possible future medical expenses, which may be incurred by me/my child(ren) as a result of any injury sustained while participating in the Ember Oglesby Arts Day Camp.

This acknowledgement of risk and waiver of liability, having read thoroughly and understood completely, is signed voluntarily as to its content and intent.

Permission to Treat:

I hereby give my permission to trained medical professionals to administer emergency medical treatment to my child(ren) should sickness occur in my absence.

Signature of parent or legal guardian \_\_\_\_\_ Date \_\_\_\_\_