



# 2018 Summer Youth Photography Camp

Monday, July 16 – Thursday, July 19

Wah-Zha-Zhi Cultural Center • 1449 W. Main • Pawhuska, OK

Please circle selected session

Ages 8-12  
9 a.m. – 12 Noon

Ages 13-17  
1 p.m. - 4 p.m.

Pre-Registration is required • No Walk-Ups • Deadline for Registration is July 6

Participants will learn the basics of how to use their digital camera to take good photos. Younger students will create collages from photos printed during class, while the older students will learn how to edit them and print out a favorite photo each day. At the end of camp, students will select several photos to be featured in a collectible, hardcover book. This beginner's class is for anyone with a point-and-shoot camera or digital SLR. **Participants must bring their own digital cameras** but basic point-and-shoot cameras are fine. **Please make certain batteries are charged for class!** Camp size is limited. Registrations accepted on a first-come, first-served basis. Osage members will receive registration preference (validation of Osage membership required). Deadline for registration is July 6. This camp is for boys and girls ages 8-17.

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#### INSTRUCTIONS:

Complete application and Sign. If applicable, attach copy of Osage Membership Card  
Fax to (817) 796-1816, mail to Osage Foundation, P.O. Box 92777, Southlake, TX 76092 or email to:  
[bwebb@osagefoundation.org](mailto:bwebb@osagefoundation.org). Questions, e-mail or please call 405-415-0383

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Participant's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age as of July 6 \_\_\_\_\_

Parent Name \_\_\_\_\_ Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Osage Member?      Y      N

Emergency Contact Person and Phone \_\_\_\_\_

Any relevant medical conditions \_\_\_\_\_

CONSENT: I authorize a representative of the Osage Nation Foundation and/or camp staff to seek medical treatment for my child if I am not present while my child is participating in this camp. In consideration of the sponsors and facility owner accepting this application, I hereby release and waive all rights to any claim for damages and/or injury my child may suffer while participating in this camp. I understand and agree that medical or other services rendered to my child by the camp sponsors/facility owner is not an admission of liability or continued services. I also grant permission for any photos or other likenesses of my child, obtained as a result of his/her participation in this camp, to be used by Osage Nation Foundation and/or its camp partners to promote its activities.

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