

## LEGO BRICK LOCO

Want to be inspired and challenged to create new and exciting LEGO® brick art? Come show off your awesome LEGO brick building skills and create a larger than life clay sculpture of a LEGO brick.

*Register by January 2.*

**Activity:** 410118

**Who:** Youth, ages 4-9

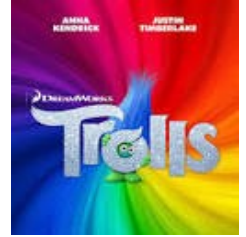
**When:** Tuesday, January 9  
6-8 pm

**Where:** Brookview Hideout Room  
Golden Valley

**Fee:** \$28

## TROLLS ART CAMP

Your young artist will be as happy as Princess Poppy in this class as they create a clay masterpiece inspired by the DreamWorks' movie *Trolls*.



This project will even put a smile on Branch's grumpy face! *Register by March 6.*

**Activity:** 110101

**Who:** Youth, ages 4-9

**When:** Tuesday, March 13  
6-8 pm

**Where:** Brookview Hideout Room  
Golden Valley

**Fee:** \$28

**FYI:** For more information or to register please check online at <https://webtrac.robbinsdalemn.com> or you can check our website: [www.robbinsdalemn.com](http://www.robbinsdalemn.com).

Mail/drop off waiver form with payment to Robbinsdale City Hall, 4100 Lakeview Ave. N, Robbinsdale, MN 55422.

Call 763-531-1278, Monday-Friday, between 8:30 am and 4:00 pm. using VISA, MC or Discover. Refunds, program credits or transfers are allowed up to registration deadline. All refunds are subject to a \$5 service fee. Confirmations are not sent. Participants should attend the class unless informed it has filled or been cancelled. No refunds after the deadline. Payment by check authorizes the city to use information from your check to make a one-time electronic transfer from your account to process the payment.

### ***Lego Brick Loco & Trolls Art Camp Registration & Waiver Form***

Please print clearly. Make checks payable to City of Robbinsdale; 4100 Lakeview Avenue No., Robbinsdale, MN 55422

Youth's Name \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_

**Circle Choice:**    **Lego Brick Loco**                      **Trolls Art Camp**

Total AMT: \$ \_\_\_\_\_ *Please list any special needs or equipment participant may need:* \_\_\_\_\_

Contact's Name: \_\_\_\_\_ Phone (H) \_\_\_\_\_ (W or cell) \_\_\_\_\_

Contact's email: \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_ Payment:  CASH  CHECK  CREDIT CARD

Credit Card Number: \_\_\_\_\_ 3 or 4 Security Code: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Card Holders Signature: \_\_\_\_\_

**Liability Waiver:** The undersigned acknowledges that recreational and sports programs involve inherent risks of personal injury. It is agreed that participation in the program is voluntary and at the participant's sole risk. The City shall not be liable for any claims, demands, injuries or damages whatsoever to the participant or participant's property arising out of the participant's participation in the program. On behalf of the participant, the undersigned releases and discharges the City, its employees or agents from all such claims, demands, injuries or damages, except those directly caused by the gross negligence of the City, its employees or agents. **Photographs** are occasionally taken and may be used for promotional purposes of the recreation programs we offer. Do not wish to be photographed, check here \_\_\_\_\_

**Signature** Participant or guardian, if participant is under 18 : \_\_\_\_\_ **Date:** \_\_\_\_\_