

**Experience
Art!**



**Join us for
Classes and
Help Celebrate
68 years of
Excellence in
Painting**

**Paxtang Art Association
P.O. Box 4743
Harrisburg, PA 17111**

PAXTANG ART ASSOCIATION

WINTER 2018

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www.paxtangart.com

**Class Schedules:
(12 weeks)**

Class Schedule

Starting Date and Time:

Tues. Feb. 6th 7:00 PM Adults

Thurs. Feb. 8th 9:30 AM Adults
 1:00 PM Adults

*Fri. Feb. 9th 7:00 PM Adults

Sat. Feb. 10th
Youth Classes 9:30 AM Ages 8-16
Youth Classes 1:00 PM Ages 8-16

*Portrait, Still Life & Intermediate Drawing

All Classes 2.5 hours

Classroom opens 15 min. prior to the start of class

General Information

Teacher — Nick Feher

Mixed Media — All painting levels

Nick Feher
(717) 805-7386

For Closings, check
paxtangart.com

Registration:

PRE-REGISTRATION IS NECESSARY

to balance classes for beneficial instruction. No new students will be taken after the first class begins. Please fill out the registration form at right and mail to address below. Registrations after Jan. 18th will have no guarantee of class preference.

ALL STUDENTS MUST BE PRE-REGISTERED BEFORE ATTENDING CLASS.

Please have **ONE CHECK**
prepared for registration as follows:

Instruction Fee check made out to
"Nick Feher" for \$75.00

ONLY NEW STUDENTS

Registration Dues check made out to the
"Paxtang Art Association" for
\$15 (Adults) or \$5 (Youth ages 8-18)

FOR YOUTH CLASSES, ALL STUDENTS MUST BE 8 YEARS OR OLDER.

Saturday classes limited to 12 students

Registration form and checks
may be mailed to the following:

Paxtang Art Association
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*Students will explore the fundamental
techniques of traditional watercolor, oil, and
acrylic painting and drawing.*

*The classes will give you the opportunity
to develop and understand the various
components of good painting.*

MATERIALS NEEDED:

Each Student must have his or her own
paint, brushes, and paper.

REGISTRATION FORM PAXTANG ART ASSOCIATION WINTER 2018

Name: _____

Phone: (home) _____ (work) _____ (Cell) _____

Email: _____

Address: _____ City: _____ Zip: _____

Class or Classes Desired: Day(s) _____ Times of class desired: _____

Signature _____ Date: _____