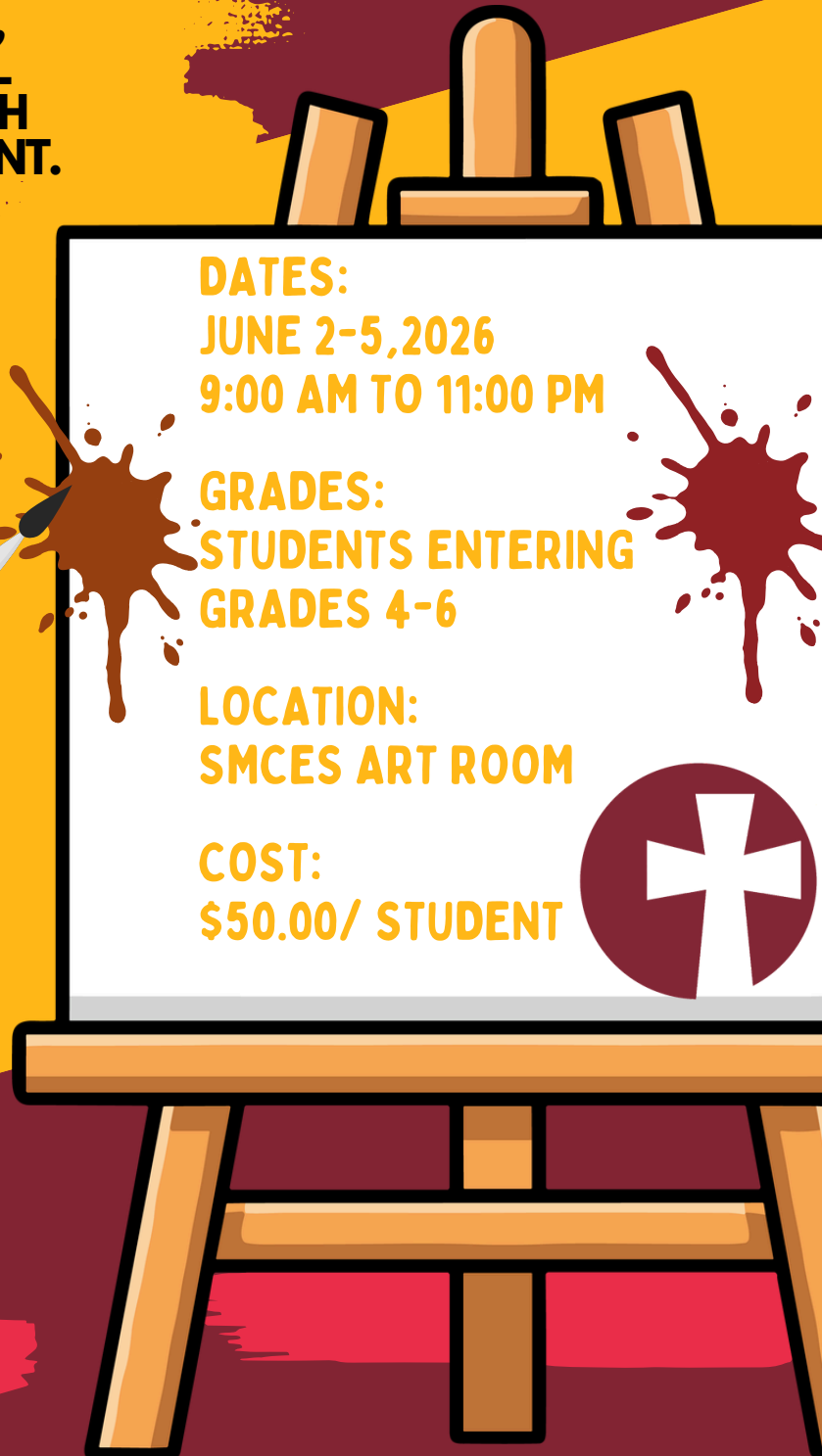


SUMMER ART SESSIONS

WITH MR. JESSE GRADL

PARTICIPANTS WILL LEARN ELEMENTS OF COLOR THEORY, COLOR MIXING, AND SEVERAL BRUSHWORK TECHNIQUES WITH ACRYLIC AND WATERCOLOR PAINT. STUDENTS WILL BE LED THROUGH THE PROCESS OF CREATING A TOTAL OF FOUR PAINTINGS.



**DATES:
JUNE 2-5, 2026
9:00 AM TO 11:00 PM**

**GRADES:
STUDENTS ENTERING
GRADES 4-6**

**LOCATION:
SMCES ART ROOM**

**COST:
\$50.00/ STUDENT**

MORE INFO AT:

WWW.ECCSS.ORG/SUMMERCAMPS/

CLASS SIZE IS LIMITED TO 25 STUDENTS



Elk County Catholic School System

Summer Art Sessions

Participants will learn elements of color theory, color mixing, and several brushwork techniques with acrylic and watercolor paint. Students will be led through the process of creating a total of four paintings consisting of two on canvas and two on watercolor paper.

Age: students entering 4-6th grade

When: June 2-5, 2026 | 9-11 am

Where: St. Marys Catholic Elementary School-Art Room

Cost: \$50/student

Directors: Jesse Gradl

How can I sign up? Fill out the form below and return to SMCES by 5/20/26. Keep the top portion.

Checks Payable to: Elk County Catholic School System

Attn. Jesse Gradl

114 Queens Road | St. Marys, PA 15857

Questions contact: Jesse Gradl email: gradlj@eccss.org



Student First Name: _____ Last Name: _____

Age: _____ School: _____

Parent Name: (Print) _____ Parent Cell: _____

Emergency Contact Name and Phone #: _____

T-Shirt Size: (Circle) YS YM YL YXL AS AM AL

I authorize parental permission for the use of name, likeness, photographic, and/or video image of my child on ECCSS's website, Facebook, Instagram, and local newspapers. ____ Yes ____ No

I, _____, agree that _____ has my consent to participate in the Elk County Catholic School System's Summer Art Sessions. I understand that Elk County Catholic School System will not assume any responsibility for accidental injury, medical, or other expenses incurred by injury during his/her attendance at the Summer Art Sessions. I hereby authorize the ECCSS Summer Art Session directors to act for me according to their best judgment in any emergency situation requiring medical attention.

Parent/Guardian Signature: _____ Date: _____