## photography

Get out. Get going

CITY OF KEARNEY PARK & RECREATION

KPR PO Box 1180 / Kearney, NE 68848 / 2005 1st Avenue / 308-237-4644 / Mon. - Fri. 8am-5pm / www.cityofkearney.org





Smile! Join professional photographer, Catrina Gray, in photography class. Moving Beyond "Auto" Mode (Photography 101) is a class for beginner to intermediate amateur photographers. So you have this beautiful new camera and you know how to turn it on...Now what? Advance beyond using the automatic settings on your digital SLR camera to learn why and when to use the variations of aperture, shutter speed and ISO. Editing is a class for all photographers. Learn how simple editing can make your images from this to that, just by using free online editing software. Min. 2 Max. 10.

Cost: \$35 per class or \$60 for two classes.

Location: Shooting Range Studio (3905 N 2<sup>nd</sup> Ave. Suite 2)

Ages: 15 and Older

Time: 6:00-8:00pm - Tuesday

Pre-registration is required for participation in the program. Please register at least 3 working days in advance for each class.

| #242 | Photography 101 – January 6  | #243 | Editing – January 27  |
|------|------------------------------|------|-----------------------|
| #244 | Photography 101 – February 3 | #245 | Editing – February 24 |
| #246 | Photography 101 – March 3    | #247 | Editing – March 31    |
| #248 | Photography 101 – April 7    | #249 | Editing – April 28    |



## Join Kearney Park & Recreation on Facebook!

In case of inclement weather, please call 4-INFO at 234-4636, ext. 4113 to hear postponements or cancellation information.

## registration $f_0 rm$

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| FAMILY NAME  | HOME PHONE                                      |                                   |  | WORK PHONE                                  |  | EMAIL  |  |  |                |              |
| ADDRESS  |   |                                   | CITY   |   |  | STATE  | 219  |  | V/S            | DITCO        |
| PARTICIPANT'S NAME   | N/E   | AGE                               | DATE OF BIRTH  | GRADE                                       | SCHOOL   | PROGRAM#   | ACTIVITY   |  |                | FEE          |
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| Please describe any special needs or accommodations that you or your child may require   |   |                                   |  |   |  |  | TOTAL  | 5  |                |              |
| NOTE: YOU WILL NOT BE MAILED A WRI<br>PARTICIPANT RELEASE STATEMENT: We in<br>furthermore, I recognize that proper care of e<br>I do hereby absolve, release and agree to hole<br>enrolled in these programs.<br>PHOTO PERMISSION: We the parents or put | inderstand th<br>quipment, fie<br>I harmless ar | e activit<br>lds and<br>nd City o | ies that my family h<br>adequate supervisio<br>f kearney, it's spons | as enrolled<br>n will be pr<br>ors, leaders | in, and I her<br>rovided, but t<br>i, agents and | eby give my permissio<br>hat inherent in these<br>volunteers from liabil | on and consen<br>activities is a d<br>lity claims in c | degree of assumption of risk,<br>ase of accidents to all family mem  | bers           | Official Use |
| PARENT/GUARDIAN/ADULT PARTICIPAN   |   |                                   | g-on parintage in  | III.  |  | 2.17   | DATE:  | The state of the s | L              |              |