

OHIO ARTS COUNCIL ARTIST-IN-RESIDENCE

VOSS FINN

APRIL 5 - 30

Participate in a community project to create outdoor sculpture on the Arts Center's grounds!

This spring, we are very excited about hosting sculptor, Voss Finn for a 4-week Artist Residency from April 5-30. Voss's practice of using discarded objects to create sculptural pieces ranging in size from small to very large, allows for an enormous amount of artistic exploration and discovery. Through the residency, we're offering opportunities for people of all ages to experience his creative process first-hand. The culminating result of this community project will be an outdoor, sculptural installation on the grounds of the Arts Center.

The Artist-in-Residence program is funded by grants from the Ohio Arts Council and the NLT Foundation. Therefore participation of community members is supported with no fee required!

Voss will be working with a "Core Group" comprised of eight high school students from Clark Montessori. This group's focus will be on designing, building, and installing a large sculpture.

Additionally, we are offering four classes (listed below) for others to work with Voss. These classes will focus on creating individual and/or group sculptures that will be incorporated into the final installation which will be presented at a Sharing Event on Friday April, 30th. All artistic levels are welcome.

Youth ages 6-8

Mondays (April 6th, 13th, 20th, 27th)
4:15 – 5:45 pm

Youth ages 9-12

Thursdays (April 8th, 15th, 22nd, 29th)
4:15 – 5:45 pm

Adults - Daytime

Wednesdays (April 14th, 21st, 28th)
1:00 – 3:00 pm

Adults and Teens - Evening

Tuesdays (April 7th, 14th, 21st, 28th)
6:00 – 8:00 pm

These classes are free of charge, but pre-registration is required since space is limited. Please call 513-631-4278 or email info@kennedyarts.org for additional information and to register.

Meet the Artist!

Please join us for a reception to welcome Voss Finn on **Sunday, March 14 from 1-3 pm** at the Arts Center. Learn more about the project and how you can be involved. Voss will share slides of his work and talk about his artistic process and his residency at KHAC. Then, we'll take a walk around the property and begin brainstorming! All ages are invited and refreshments will be served.

About Voss Finn

I am a sculptor/installations artist. I work with found objects. I like using materials no one else wants to build extraordinary structures. This experience gives me a feeling of renewal, freshness, and invigorates what had been overlooked and passed by. In my residency, I hope to share my process with people of whatever age. In past exhibitions I have enjoyed helping the students choose elements from discarded materials and experience the joy of building something monumental in size. Mine is a process of grappling and discovery, bringing forth fleeting moments of truth.

I received my training at the Art Academy of Cincinnati, where I received a BFA. I hold a Master of Fine Arts degree from the Milton Avery School of Fine Arts, Bard College. My installations have been exhibited throughout the United States, including Southern Ohio Museum, the Sculpture Center in Cleveland, Pier Walk in Chicago, Weston Art Gallery in Cincinnati and Pyramid Hill Sculpture Park in Hamilton, Ohio. More information at vossfinn.com.



TODAY'S DATE _____

KENNEDY HEIGHTS ARTS CENTER REGISTRATION FORM

Send payment with completed form to: **Kennedy Heights Arts Center, 6546 Montgomery Road, Cincinnati, OH 45213**

Student Name _____ Parent/Guardian name _____

Age, Grade, & School (if applicable) _____

Phone (Home) _____ Phone (Work or Cell) _____

Address _____ Email _____

(No. & Street)

(City)

(Zip)

| | CLASS NAME | COST |
|--|----------------------------------------|------|
| | | |
| | | |
| | TAX-DEDUCTIBLE CONTRIBUTION (OPTIONAL) | |
| | TOTAL | |
| | DATE PAID | |

(CHECK MADE PAYABLE TO KENNEDY HEIGHTS ARTS CENTER) (MASTER CARD OR VISA ONLY)

CIRCLE: CASH | CHECK | CR. CARD NO. _____ EXP. DATE _____

SIGNATURE _____ PRINT NAME ON CARD _____

I would like to apply for a scholarship. My application is enclosed. Scholarship Applications are available at www.kennedyarts.org or call 631-4278.

I hereby release and hold harmless the Kennedy Heights Arts Center (KHAC) and its employees from any and all liability for any injuries, loss or other claims arising out of this program.

STUDENT SIGNATURE (OR PARENT/GUARDIAN IF STUDENT IS A MINOR): _____

DATE: _____

KENNEDY HEIGHTS ARTS CENTER STUDENT EMERGENCY INFORMATION AND RELEASE FORM

Photo Release (adults and children)

I, _____, parent/guardian of _____ hereby grant to Kennedy Heights Arts Center the right and license to use his/her name, image, likeness and comments in the Kennedy Heights Arts Center materials for internal and external audiences. These materials include but are not limited to advertisements, brochures, news released, magazine, newspapers, newsletters, videos and web sites.

Parent/Guardian Signature _____ Date _____

Print name of parent or guardian _____

Release/Permission Form (to be completed if student is under age 18)

Student Name _____ Date of Birth _____

In the event that serious injury should occur involving my child(ren), I wish for the Kennedy Heights Arts Center to take all appropriate steps to notify me, or the emergency contact listed below, immediately of the event, but if I am inaccessible for any reason, **I authorize whatever medical attention is deemed appropriate** for my child(ren). I agree to the terms of this consent.

Parent/Guardian Signature _____ Date _____

Print name of parent or guardian _____

Emergency Contact _____ Phone _____ Relationship _____

Emergency Contact _____ Phone _____ Relationship _____

Please list any medical conditions/allergies _____

In addition to the parents/guardian, the Kennedy Heights Arts Center is authorized to release my child(ren) at the end of class to the following persons.

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

I understand and agree that my child(ren) will not be released after class until picked up by me or any persons listed above. In the event of an emergency my child(ren) will not be released unless I speak directly to an authorized Kennedy Heights Arts Center staff member and give specific instructions.