GLASS ROOTS

GLASSROOTS' BEAD SHOP PRESENTS

Spring 2021 Jewelry Business-in-a-Box Workshop Weekend Intensive (4 Days) Saturday and Sunday, June 12&13 and 19&20

The Bead Shop is a training program that teaches participants, in multiple workshops offered throughout the year, how to create their own part-time jewelry making business. Our instructors will teach you to make flameworked beads and to design, finish and assemble jewelry. We will teach you how to sell your products online, at craft fairs, and to wholesale purchasers. **No previous glass, art or business experience is required for this program.**

Our Jewelry in-a-Box workshop will include:

- 1. **Hand-on Bead Making:** Skilled instruction and studio practice in the production of regular, hollow, designer and wire-wrapped beads. Each participant will learn how to make finished jewelry as well as jewelry components.
- 2. **Business Training:** Students will learn the essentials of creating a successful part-time business including product selection, pricing, costing, marketing and sales. You will learn how to use social media for business and receive training on manufacturing to industry standards for small production contracts.
- 3. **Industry/Trade Show Exposure:** Students will learn about trade shows, wholesale sales and visit industry events when possible.
- 4. **Program Completion:** Graduates will have the opportunity to produce beads and other products under small contracts; display work at gallery exhibitions; establish online businesses and participate in GlassRoots' sponsored seasonal sales opportunities.

This is a short and intensive program offered over two consecutive weekends. Students are expected to arrive on time and attend all classes.

Tuition & Fees

Thanks to the generosity of Newark Arts, we can offer six full scholarships to this program. There are no fees to attend.

Applications will be accepted on a rolling basis.

Questions? Contact Ellen Brown, ebrown@glassroots.org.

To apply, please complete the following pages and return the completed, signed forms to GlassRoots via email at info@glassroots.org,

Or, via snail-mail to: GlassRoots Bead Shop 2021 10 Bleeker Street Newark NJ 07102

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PROGRAM APPLICATION

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Date:	_	
First Name:	Last Name:	
	rposes of understanding the population we ser oonse is optional and will be reported anonymo	
What is your gender identity?: Fen	nale Male Non-binary or gender nonconfo	orming Prefer not to respond
Date of birth (MM/DD/YY)/_	_/ Current age: HS Dip	loma GED
Address:	City:	State: Zip:
Home Phone:	Cell:	
Email:		
Please tell us why you're interested	d in this program:	
Please list two references that are	not related to you:	
Name	Name	
Phone	Phone	
Email	Email	
Emergency Contact Information:		
Contact Name:	Rela	tionship to you:
Cell Phone:	Email:	

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PROGRAM RELEASE FORM

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Commitment Contract and Responsibilities

I acknowledge that I will be working in an environment that is inherently dangerous. I further acknowledge that I will be engaging in activities that involve risks of personal injury and, therefore, require my full attention at all times. As such, I agree to follow all rules set out by the staff of GlassRoots and to exercise due care and caution for both myself and others at all times.

I assume full responsibility for my safety in connection with these activities, and release GlassRoots and its officers, Board of Trustee, employees and agents from liability for injury related to these activities. I also acknowledge that GlassRoots is not responsible for the protection, care or insurance coverage for tools, work in progress or works of art in the event of damage or destruction, or for anything I bring to class or leave behind after departure.

I authorize GlassRoots to use pho	otographs or other images of me and	my work for any purposes it finds		
appropriate, such as for publication, adve	ertisement or exhibition, without cha-	rge or further permission.		
l,	, in order to participate in the Bead Shop Program, will follow all			
rules set forth by GlassRoots and take thi	s responsibility seriously. I understan	d that I may be terminated from the		
program if these rules are not followed.				
I understand and accept all terms and policies stated herein.				
Applicant Signature:		Date:		
Do you have any allergies, medical proble If yes, please explain:	ems or other special considerations?	YES NO		

^{**}If you are pregnant or thinking of becoming pregnant, The International Society of Glass Beadmakers (http://www.isqb.org) recommends that you discuss the potential risks with your healthcare provider before enrolling in the class. Upon request, we will supply a **Material Safety Data Sheet** for your doctor.