2016 REGISTRATION Please complete a separate registration form for each child.

AGES 5-6 & 7-10 : CHOOSE FROM ART CAMP OR CLAY CAMP

Child's Name		•		•		
Parent/Guardian Name						
Address with Zip Code						
Email						
Contact in Case of Emergency						
Primary Phone			Alt. Phor	ne		
If you would like your child in t						
PAYMENT METHOD: Please send form and paymen ☐ CASH ☐ CHECK CREDIT					_	
CARD #					CSV_	
NAME ON CARD					EXP:	
CARDHOLDER SIGNATURE _						
SELECT YOUR WEEK(S)	AGES 5-6 ART	AGES 5-6 CLAY	AGES 7-10 ART	AGES 7-10 CLAY	BEFORE CARE*	
WEEK 1 (June 8-10. 3 Days!)						
WEEK 2 (June 13-17)						
WEEK 3 (June 20-24)						
WEEK 4 (June 27-July 1)						
WEEK 5 (July 5-8. 4 Days!)						
WEEK 6 (July 11-15)						
WEEK 7 (July 18-22)						
WEEK 8 (July 25-29) WEEK 9 (Aug 1-5)						
G 1					*Ar	t Camp Only
COST PER WEEK (Includes Weeks 2, 3, 4, 6, 7, 8 and 9: Members Week 1: Members \$100 / Non Member Week 5: Members \$135 / Non Member	\$165 / Non N s \$120		Before Before	o T-Shirt): Care \$25 / After Care \$15 / After Care \$20 / After	Care \$45 / Both	n \$54
MEMBERSHIP: ☐ \$25/STU Please check Membership opt Registration must be accompanied and payment. Enrollment is on a "	ion box to d by a comp	add (option oleted registra	al). tion form	eople) ⁻ OTAL AMOL	JNT DUE _	
SIGNATURE					DATE	