



# REGISTRATION FORM

## KEETON KIDS Performing Arts Summer Camp

CAMPER'S NAME: \_\_\_\_\_

MALE     FEMALE    DATE OF BIRTH \_\_\_\_\_    AGE: \_\_\_\_\_

PARENTS/GUARDIANS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_    CELL PHONE: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_

EC PHONE: \_\_\_\_\_    RELATIONSHIP: \_\_\_\_\_

**CAMP FEES \$325** (\$150 week one/ \$175 week two) **Total Due:** \_\_\_\_\_

***MAKE CHECKS PAYABLE TO SENIOR CENTER FOR THE ARTS***

### **REFUNDS – The wizard of Oz, *the Musical***

**FEES:** May 28, 2019- June 7, 2019 \$325 Total (\$150 week one/ \$175 week two)

**REFUNDS:** SCA will issue refunds for cancellations only if requested by May 14, 2019, less a mandatory \$100 inconvenience cancellation fee for each camper. No refunds given if registration is cancelled from May 15<sup>th</sup>, 2019 forward, or if your child/children do not show up on the first day of camp, or if your child/children leave camp early for any reason.

**Please provide the names and copies of the driver's license of all persons dropping off/picking up your child, including yourself. Your child WILL NOT be released to anyone not on the list, no exceptions.**

Name	Driver's License #	Relationship to Child
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

### FOR OFFICE USE

**PAYMENT (CIRCLE):** CASH    CHECK # \_\_\_\_\_    VISA    MC    DISCOVER

**RECEIPT NUMBER:** \_\_\_\_\_    **DATE PAID:** \_\_\_\_\_