

DFAC SUMMER ART CAMP WEEKS 2010

Students Name _____

CC# _____

Students birthday _____ / _____ / _____ Students age _____

Exp. Date _____ SSV _____ Type _____

Telephone (home) _____ (work) _____

Check # _____

Address _____

City _____ State _____ Zip _____

Parents Names _____

Parents email _____

Alternate Emergency contact (name) _____ (phone) _____

Please LIST any **allergies** or health conditions necessary: _____

(Check which camp for each week registered)	Mini Masters 4.5-5 yrs		Check which camp to the right			Art Squad 11-14 yrs			Early Registration ends April 30 th	Sibling Disc each camper	3 or more Weeks Disc	Extended Care	Scholarship	TOTAL	Full Payment or Deposit	Balance Due Office Use Only
	Member	Non-M	Member	Non-M	SSV Visual Art 6-10 yrs	Musical Theater 6-12 yrs	Mural Madness 8-12 yrs	Member								
Sessions																
Week 1- 6/14 – 18	<input type="checkbox"/> \$75	<input type="checkbox"/> \$95	<input type="checkbox"/> \$145	<input type="checkbox"/> \$165	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$155	<input type="checkbox"/> \$175	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/>	<input type="checkbox"/>		
Week 2- 6/21 – 25	<input type="checkbox"/> \$75	<input type="checkbox"/> \$95	<input type="checkbox"/> \$145	<input type="checkbox"/> \$165	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$155	<input type="checkbox"/> \$175	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/>	<input type="checkbox"/>		
Week 3- 6/28 – 7/2	<input type="checkbox"/> \$75	<input type="checkbox"/> \$95	<input type="checkbox"/> \$145	<input type="checkbox"/> \$165	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$155	<input type="checkbox"/> \$175	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/>	<input type="checkbox"/>		
Week 4- 7/5 – 9	<input type="checkbox"/> \$75	<input type="checkbox"/> \$95	<input type="checkbox"/> \$145	<input type="checkbox"/> \$165	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$155	<input type="checkbox"/> \$175	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/>	<input type="checkbox"/>		
Week 5- 7/12 – 16	<input type="checkbox"/> \$75	<input type="checkbox"/> \$95	<input type="checkbox"/> \$145	<input type="checkbox"/> \$165	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$155	<input type="checkbox"/> \$175	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/>	<input type="checkbox"/>		
Week 6- 7/19 – 23	<input type="checkbox"/> \$75	<input type="checkbox"/> \$95	<input type="checkbox"/> \$145	<input type="checkbox"/> \$165	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$155	<input type="checkbox"/> \$175	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/>	<input type="checkbox"/>		
Week 7- 7/26 – 30	<input type="checkbox"/> \$75	<input type="checkbox"/> \$95	<input type="checkbox"/> \$145	<input type="checkbox"/> \$165	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$155	<input type="checkbox"/> \$175	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/>	<input type="checkbox"/>		
Week 8- 8/2 – 6	<input type="checkbox"/> \$75	<input type="checkbox"/> \$95	<input type="checkbox"/> \$145	<input type="checkbox"/> \$165	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$155	<input type="checkbox"/> \$175	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/>	<input type="checkbox"/>		
Week 9- 8/9 – 13	<input type="checkbox"/> \$75	<input type="checkbox"/> \$95	<input type="checkbox"/> \$145	<input type="checkbox"/> \$165	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$155	<input type="checkbox"/> \$175	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/>	<input type="checkbox"/>		
Week 10- 8/16 – 20	<input type="checkbox"/> \$75	<input type="checkbox"/> \$95	<input type="checkbox"/> \$145	<input type="checkbox"/> \$165	N/A	<input type="checkbox"/>	<input type="checkbox"/>	N/A	N/A	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/>	<input type="checkbox"/>		
Office Use Only	In Book <input type="checkbox"/>	In PC <input type="checkbox"/>	Scholarship from: _____			Registered by: _____			Date: _____	Total Initial Payment						

Release: By signing this form I release the Dunedin Fine Art Center from any and all liability from any bodily injuries sustained to my children, or for loss or damage of any personal articles, while on the premises or participating in any activity sponsored by DFAC. I further agree that in the event medical attention is required due to accident or illness, The Dunedin Fine Art Center shall be permitted to seek such medical services as it deems necessary and appropriate through EMS/911 and/or local hospitals. DFAC is authorized to take photographs (group/individual) for archives, grants, and promotional materials. **Tuition and Deposits are non-refundable.**

Need to sign up for extended care? Yes No (\$40 per week: 7:30 am - 6pm)

Parents Signature _____

*****Grouping** with friends available by advance **written request** if age group/art skills are appropriate. Changes cannot be made after program has started.

Verification of Kindergarten completion is necessary for 6 year olds.

Please **group** my child with: _____

The following persons are allowed to **pick up** my child: _____