

REGISTRATION FORM 2015 Summer Arts Camp June 22 – 26, 9 a.m. to 4 p.m.

Student Name: _____ Age: ____ Sex: ____ DoB: ____ Parent/ Guardian Name(s): Address:
 City:
 State:
 Zip:

 Phone 1:
 Phone 2:
Do you foresee the need for the Early Drop-Off/ Late Pick-Up service during the week? In case of an emergency, every effort will be made to contact the parent or guardian listed above; however, if they cannot be reached please notify: Emergency Contact: Relationship: Phone: Octor's Name: Phone: Doctor's Name: **HEALTH HISTORY** Illnesses: Allergies: Physical Disabilities: Medications to be dispensed? _____ Name of Medication: _____ Amount: Time(s) to be given: Special Notes: Unless notified in advance, only the parent, guardian, or emergency contact listed above will be permitted to pick-up children from camp grounds. Please make sure your child has had breakfast before arriving to camp. Non-refrigerated lunch should be provided by the parents; snacks will be offered for by park staff each day. Any parent who wishes to consult with a camp employee or instructor may do so by leaving a message for them at the front desk or by meeting with camp staff 30 minutes before or after camp. FEE: \$100 - First Child (\$90 for CAC Members) | \$5 Sibling Discount Fees must be paid at the time of registration, and no later than Friday. June 5th Make checks payable to "CAC" or pay online at www.artsdouglas.org Parent/ Guardian Signature: Date: OFFICE USE ONLY Amount Paid: ____ Check# ___ Cash: ___ Receipt # ____ Staff Signature:

CULTURAL ARTS COUNCIL CLASSES, WORKSHOPS AND CAMPS POLICIES

FEES: All fees are non-refundable and non-transferable. CAC does not pro-rate classes, workshops, and art camps.

CANCELLATIONS: If a class or workshop has to be cancelled by the instructor or CAC, you will be notified as soon as possible and a make-up session will be scheduled. If a student cannot attend a class no make-up session is offered.

STUDENT BEHAVIOR POLICY: CAC reserves the right to cancel, with no refund, the registration of a student, if participation by the student is deemed disruptive or interferes with the learning atmosphere of the class/workshop.

IMAGE RELEASE: I (the undersigned) hereby grant to CAC the right to photograph me or my child during classes and performances, and to use my or their image, photograph, silhouette and other reproductions of their physical likeness in connection with ongoing CAC publicity. I agree that I will not assert or maintain against CAC, their successors, assigns and licensees, any claim, action, suit or demand of any kind or nature whatsoever, including but not limited to those grounded upon invasion of privacy, rights of publicity or other civil rights, or for any reason in connection with CAC's authorized use of me or my child's likeness for CAC publicity purposes, By my initials and signature here I understand that I agree to the above mentioned guidelines and completely turn over all right to the images to CAC.

Initial _____

RELEASE, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT: I (the undersigned) hereby
understand and acknowledge the nature and extent of the activities that will be involved in the
classes/workshops/camp and assume the risk inherent in such activities on behalf of myself and any
minor children. I voluntarily waive any and all claims, costs, liabilities, expenses (including attorney's
fees) and judgments against CAC, its directors, officers, employees, subcontractors, and agents and
hereby release, excuse and discharge CAC, its directors, officers, employees, subcontractors, and
agents from all claims, costs, liabilities, expenses (including attorney's fees), and judgments which
might arise out of any participation in the classes/ workshops/camp and all aspects attendant thereto.
The undersigned further agrees to indemnify and hold CAC, its directors, officers, employees,
subcontractors, and agents harmless from any and all claims, costs, liabilities, expenses (including
attorney's fees) and judgments that may arise out of my/my child's participation in the

attorney's fees) and judgments that may arise out of my/my child's participation in the classes/workshop/camp.			
		Initial	
Parent or Guardian Signature	Print Name	Date	