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| **DANCING ON THE GO** **SUMMER CAMP REGISTRATION FORM** |
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|  Campers Name: Today’s Date: |
|  Date of birth: | Age: | Grade: | T-Shirt SIZE: XS S M L (Please Circle) |
|  School: | Student Email: |  |
|  Parent / Guardian Name:  |
|  Relationship to student: (mother, father, grandma, etc.): |
|  Address  | Home Phone:  |
|  City:  | State:  | Cell Phone:  |
|  Employer Name:  | Work Phone:  |
|  Position:  | E-mail:  | Zip Code  |
|  Parent / Guardian Name:  |
|  Relationship to student: (mother, father, grandmother, etc.): |
|  Address:  | Home Phone:  |
|  City:  | State:  | Cell Phone:  |
|  Employer Name:  | Work Phone:  |
|  Position:  | Email:  | Zip Code:  |
| **Emergency Contact Information** Emergency Contact Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to student (Grandparent, Aunt, uncle, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Does your child have known allergies? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Chronic illnesses/conditions? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Additional helpful information about your child? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ List medications that child may need during camp: (This includes Advil, Tylenol, Clairton, Epipen, Asthma pump, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ List any activities from which the camper should be exempted for health reasons: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ For medication to be administered during camp, parents must sign below to let us know that we have consent  to provide the child with their medication.  Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Pl ease check all Weeks Attending Week 1 (June 10-14) Week 2 (June 17-21) Week 3 (June 24-28)** **Week 4(July 1-5) closed July 4 Week 5 (July 8-12) Week 6 (July 15-19) Week 7 (July 22-26)** **Week 8 (July 29-Aug 2) Week 9 (Aug 5-9)** **DANCING ON THE GO PARTICIPATION WAIVER AND RELEASE FORM**  \*Dancing On The Go, LLC contains a physical sport activity. I understand that my child will be under supervision and instruction to reduce the risk of injury,  however; I hereby acknowledge that there are inherent risks associated and accompanied with participation in any sport activity and my child may be  injured because of accident arising from participation in this program.  \*I knowingly accept and assume the risk of injury and hereby release and hold Dancing On The Go, LLC, its employees, staff, and  agents harmless from and against all claims or cause of actions of any kind arising from or out of injury that may occur from my child's participation  in Dancing On The Go, LLC including the use of its facilities and equipment. \*I acknowledge all of the policies and procedures relating to the activities, facilities and equipment and understand that the safe and proper use of facilities,  equipment or participation in these activities is dependent upon carefully following such policies and procedures. I assume full responsibility for all of my  child's actions in connection with participation in Dancing On The Go, LLC. I agree that my child will abide by all safety rules, regulations, policies and  procedures of the program.  \*I do hereby give permission to Dancing On The Go, LLC to use any videotapes or photographs of my child for the purpose of publication and advertisement. \*At the end of camp Dancing on the Go will have a dance showcase. In the dance showcase there is a possibility that Dancing On The Go, LLC will have video clips and pictures that will capture moments from our campers dance and summer experience. Please sign below the  photographic waiver/consent statement.

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|  Student Name: |
|  Parent Name:  | Date:  |
|  Parent Signature: | Date:  |

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**To be completed by staff only**

**Date Paid:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Amount Paid:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Method Of Payment:**  CASH CHECK MONEY ORDER PAYPAL / CARD

**Registration Fee**: \_\_\_\_\_\_\_

**T-shirt Fee:** \_\_\_\_\_\_\_\_

# **Summer Policies and Procedures**

***Parent Signature Form for Policies and Procedures***

***(Please be sure to sign the last page)***

### **Registration (Non-Refundable)**

A registration fee is required with the application form to reserve camp space. Registration is not considered complete until this fee is paid. This fee is non-refundable.

**\*Registration Fee: $65 (T-shirt included)**

\*T-shirts will need to be worn on **all field trips** (unless specified otherwise) and T-shirts will need to be worn during the end of Summer Camp Dance Showcase.

## Weekly camp fee:

**\*$100 Per Child Per Week**

**\*$15 Off Sibling rates are included *(please view details below)***

**The first sibling weekly camp fee is $100 and any siblings after that will get $15 off their weekly camp fee.**

**\*Day Rates: $40 per day per child (If your camper will not be attending a full week of camp, we now offer single day rates) Non-negotiable fee & registration fee must be paid)**

**\*Holding Fee: $25 holding fee for the weeks / days a camper will not attend camp. Please notify camp staff at least a week in advance any days your child will not be attending camp.**

**Tuition (Non-Refundable) & (No Prorated rates)**

Tuition balance is due **EVERY FRIDAY** before the upcoming scheduled week of camp. If not submitted by Friday, all camp fees should be submitted Monday morning during drop off. If payment is not submitted by Monday morning it is considered late. A **$25 late fee** will be applied to all tuition paid after the due date.

**Please see the list of all the camp tuition dates: (All payments are due on the following dates)**

**\*Week 1 Payment due Friday, June 7th**

**\*Week 2 Payment due Friday, June 14th**

**\* Week 3 Payment due Friday, June 21st**

**\*Week 4 Payment due Friday, June 28th**

**\*Week 5 Payment due Friday, July 5th (No Camp on July 4th) (Regular Camp Tuition Fee still applies)**

**\*Week 6 Payment due Friday, July 12th**

**\*Week 7 Payment due Friday, July 19th**

**\*Week 8 Payment due Friday, July 26th**

**\*Week 9 Payment due Friday, August 2nd**

**\*\*\*Campers are not permitted to stay in camp if tuition balance is not paid in full. Tuition is non-refundable.**

***No Prorated rates & Nonrefundable policy applies***

***\*Please note that Camp tuition pays for most activities. However, there will be some extra fees for specific field trips, tips for when we visit certain restaurants, mall trips, transportation, etc. Parents will be notified ahead of time as to when fees are due.***

###  **Payments**

Tuition can be paid in **cash, check, money order, and pay pal**. Online payments are available 24/7 via PayPal or at dancingonthegonc.com (Click on summer camp tab)

**\*Cash: If possibly please have exact cash amount. For safety and security reasons we do not keep a lot of cash on the premises.**

**\*Certified Checks: All Certified checks can be made out to Dancing On The Go, LLC or Courtney Jant**

**\*Credit/Debit Cards: Credit / debit card payments can also be made online at www.paypal.com**

**Late Pick Up**

It is expected that students be picked up on time. If there’s an emergency, please contact us or if you’re running late. **Any student who is picked up after 6pm will be charged a $25 late fee. If more than 15-30 minutes late there will be a $30.00 charge; for 40-60 minutes late a $60.00 charge will be assessed.**

Parent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_