

Peggy & Renee's Fired Art Studio

2008 Summer Camp Registration Form

Name: _____ Phone Number: _____

Address: _____

Food Allergies: _____

Medical Restrictions/Concerns: _____

Emergency Contact: _____

Session Attending (circle one):

<u>9AM – 11AM</u>		<u>6PM – 8PM</u>	
Brush Stroke Camp	June 16-20	New Project Camp	June 16-20
New Project Camp	June 23-27	Brush Stroke Camp	June 23-27
Mirror Camp	July 7-11	Brush Stroke Camp	July 7-11
Calendar Camp	July 28-Aug. 1	New Project Camp	July 28-Aug. 1
New Project Camp	Aug. 11-15	Mirror Camp	Aug. 11-15
Brush Stroke Camp	Aug. 18-22	Calendar Camp	Aug. 18-22

I, _____, give _____ permission to participate in Summer Camp at Peggy & Renee's Fired Art Studio on the above circled dates. By signing this form I acknowledge the following:

1. There is a potential for clothing to become stained/damaged and know that Peggy & Renee's Fired Art Studio will not replace or compensate for the stained/damaged clothing.
2. Peggy and Renee's Fired Art Studio will go over all safety precautions on the first day of camp and will not be liable for any injuries that may be obtained during camp. The following steps will be taken in case of an emergency: if a minor emergency arises, Peggy & Renee's Fired Art Studio will contact the emergency contact listed on this sheet. If the emergency contact cannot be reached, an ambulance will be called. In case of a severe emergency, an ambulance will be called and then the emergency contact will be notified.
3. Snacks will be provided during camp and I have listed all known food allergies.

Parent/Guardian Signature: _____ Date: _____

I acknowledge that pictures may be taken during camp of the kids completing their projects. I give my permission for my child's picture to be taken and published on Peggy & Renee's Fired Art Studio website. Please Initial: _____

Deposit:

Amount Pd.: _____ Cash Ck. # _____ Charge