

# PLAY@ART!

www.playatart.com | 13 S. Haddon Avenue, Haddonfield, NJ 08033 | (856) 433-8784

## Summer Camp | Registration | 2022

ages 4-10

Date of Registration: \_\_\_\_\_ Camp dates requested: \_\_\_\_\_

Child 1: \_\_\_\_\_ age: \_\_\_\_\_ birthday: \_\_\_\_\_

Child 2: \_\_\_\_\_ age: \_\_\_\_\_ birthday: \_\_\_\_\_

Child 3: \_\_\_\_\_ age: \_\_\_\_\_ birthday: \_\_\_\_\_

Parent 1: \_\_\_\_\_ cell: \_\_\_\_\_

email: \_\_\_\_\_

Parent 2: \_\_\_\_\_ cell: \_\_\_\_\_

email: \_\_\_\_\_

Other adult permitted to pick-up: \_\_\_\_\_ relationship: \_\_\_\_\_

I give permission for my child/children to go on instructor supervised walks.

**I do** /  **I do not** give permission for my child to be photographed during class for art projects, parent communications, or P@A marketing, including social media (no names are ever provided).

My child has the following food allergy:

I am including an EpiPen to be used in case of emergency.

**Child 1** number of camp weeks: \_\_\_\_\_ x \$260 (p/wk) total: \_\_\_\_\_

**Child 2** number of camp weeks: \_\_\_\_\_ x \$220 (p/wk) total: \_\_\_\_\_

**Child 3** number of camp weeks: \_\_\_\_\_ x \$220 (p/wk) total: \_\_\_\_\_

**Total:** \_\_\_\_\_

(50% deposit is charged at time of registration to secure placement)

## Payment

To insure your child's placement in a class, please return registration with credit card payment information. A desposit of 50% will be charged to secure your childs registration, fully refundable for cancellations made up to 1 week prior of camp start date. Deposits for cancellations made within 1 week of start date will be fully reimbursed provided we are able to fill that spot. The balance will be charged, or due by check or cash, when the camp week begins. Checks should be made payable to **Play at Art**. **Thank you!**

credit card number: \_\_\_\_\_ exp. date: \_\_\_\_\_ / \_\_\_\_\_ ccv: \_\_\_\_\_ zip code: \_\_\_\_\_