



REGISTRATION FORM – 2018 Youth Art Camps

(One form per student, please) PLEASE PRINT LEGIBLY – THANK YOU!

Name: _____

Nickname (if any): _____ Age: _____ Birth Date: _____ Sex: M F

Name of Parent or Guardian: _____

Street Address: _____

City/State: _____ Zip: _____

Home Phone: _____ Day Time/Work phone: _____ Email: _____

CLASSES, DATES & TIMES (PLEASE CHECK AS APPROPRIATE)

<input type="checkbox"/> Theater Camp	(ages 5-7)	June 18-30, 2018	9 am-noon	Tuition: \$140
<input type="checkbox"/> Theater Camp	(ages 8-14)	June 18-30, 2018	9 am-4 pm	Tuition: \$280

Theater Camp meets at Berkeley Springs High School. Campers are responsible to bring a packed lunch, drinks and snacks.

Final Theater Camp performances are held on Friday & Saturday, June 29-30 at the high school.

<input type="checkbox"/> Visual Arts Camp	(ages 6-14)	July 16-20, 2018	9 am-3 pm	Tuition: \$140
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Art Camp meets at the Ice House. Campers are responsible to bring a packed lunch, drinks and snacks.

Multi-Sibling Discount – Enrollment of second immediate family member is discounted at 15%. Enrollments of third and additional immediate family members are discounted at 25%. (Discount applied to lowest tuition first.)

Multi-Camp Discount – One child can attend both camps and still qualify for a MAC discount of 15%.

I wish to request scholarship assistance. Please send me a scholarship form. (Must be received by MAC by June 8 for Theater Camp, July 1 for Visual Arts Camp) **Scholarship form is available online at www.macicehouse.org**

PAYMENT Please check one: **PLEASE MAKE CHECKS PAYABLE TO: MORGAN ARTS COUNCIL**

I have enclosed the full payment of \$ _____.

I would like to make two payments and have enclosed \$25 as a deposit.

DISCLAIMER/RELEASE STATEMENT: I give the Morgan Arts Council permission to use my photograph and/or video in program related activities and press. I understand that the Ice House is under renovation and hold MAC staff and Board of Directors harmless in the event of accident, injury, or loss of property. FOR PARENTS OF CHILDREN ATTENDING CLASSES: I understand that MAC is not responsible for the time or manner in which my child may arrive at or leave the activity. I understand that I will be required to sign my child in and out each day or provide the name of the person responsible for signing out my child at the end of class/camp. I also understand that my child will be expected to respect their instructor and environment where the class/camp is held and that the instructor has my permission to enforce basic rules about the class/camp for the safety of all.

Please mail completed registration & check to:

**Morgan Arts Council
PO Box 248
Berkeley Springs, WV 25411**

Signature: _____ Date: _____
(Student or Parent/Guardian for child)

EMERGENCY CONTACT FORM (one form per student please)

2018 Youth Summer Camp

Child's Name: _____ Date: _____

In case of emergency contact:

Primary contact -- Name: _____

Phone # home: _____ work: _____ cell: _____

2nd contact -- Name: _____

Phone # home: _____ work: _____ cell: _____

People authorized to pick up child:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Medical:

Does your child have medical insurance? yes no

Insurance Company: _____

Policy Number: _____

Does your child have any medical restrictions or allergies? yes no

If yes, please explain: _____

Any special needs or concerns we should be aware of? yes no

If yes, please explain: _____

DISCLAIMER / RELEASE STATEMENT

I give the Morgan Arts Council permission to use my child's photograph in program related activities and press. I understand that the Morgan Arts Council is not responsible for the time or manner in which my child may arrive at or leave Berkeley Springs High School. I further hold the Morgan Arts Council staff and Board of Directors harmless in the event of accident or injury. I also understand that my child will be expected to respect their instructor and that the instructor has my permission to enforce basic rules about the class and the High School site. I understand that I will be required to sign my child in and out each day and that the Morgan Arts Council and its Board of Directors are not responsible for personal injury or loss of property.

Parent/Guardian Signature: _____ Date: _____