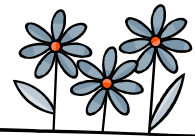




# 2012 Summer Girls Camp



25 Flint Drive • North East, MD 21901 • 410-287-3546 •  
www.cecildancercenter.com

Please complete **both** sides of this registration sheet and return it to Cecil Dancercenter. A \$30.00 non-refundable registration fee **per family** and the appropriate deposits must accompany this registration.

## CAMPER REGISTRATION & ENROLLMENT FORM

Child's Name: \_\_\_\_\_  
Last First Middle

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Does child live with you? \_\_\_\_\_

Mother's Address Street City State Zip Code

Mother's Home Phone Number: \_\_\_\_\_ Mother's Work Number: \_\_\_\_\_

Mother's email address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Does child live with you? \_\_\_\_\_

Father's Address Street City State Zip Code

Father's Home Phone Number: \_\_\_\_\_ Father's Work Number: \_\_\_\_\_

Father's email address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Extra Emergency Name & Number: \_\_\_\_\_

List the names of any person/s who are authorized to pick-up your child from camp (except parents) and their relationship to your child:

Please initial after reading each notice below on the line provided:

\_\_\_\_\_ I understand that deposits will not be transferred to another day/week unless 2 weeks notice is given **AND** there is an opening available that day/week

\_\_\_\_\_ I understand that if I decide to cancel my scheduled day/week, I am still responsible for the balance due for that day/week, unless 2 weeks notice is given.

### Weekly Requirements:

My child will attend on the weeks circled on this registration form. Tuition for each week is \$139.00. I have enclosed a \$25 deposit for each week that is circled. I realize I will owe the balance of \$114.00 on the Monday of each week of attendance. There is a 10% sibling discount for 2 or more siblings registered for Girls Camp or Just 4 Boys Camp. Discount is reflected in weekly balance; \$25 weekly deposits for each child still apply.

\_\_\_\_\_ I would like the weekly balance charged to my credit/debit card on file each week of attendance.

### Daily Requirements:

My child will attend on the days circled on this registration form. Tuition for each day is \$31.00. I have enclosed a \$10 deposit for each day that is circled. I realize I will owe \$21 per day on the Monday of each week of attendance. There is a 10% sibling discount for 2 or more siblings registered for Girls Camp or Just 4 Boys Camp. Discount is reflected in daily balance remaining; \$10 daily deposits for each child still apply.



**Please continue on the back. Incomplete registrations will not be accepted.**

| CAMP WEEKS  | MONDAY                                | TUESDAY   | WEDNESDAY                               | THURSDAY  | FRIDAY                               |
|---|---------------------------------------|-----------|---|-----------|--------------------------------------|
| June 11-15  | June 11                               | June 12   | June 13                                 | June 14   | June 15                              |
| June 18-22  | June 18                               | June 19   | June 20<br><i>Field Trip (\$4)</i>      | June 22   | June 23                              |
| June 25-29  | June 25                               | June 26   | June 27<br><i>Field Trip (\$5)</i>      | June 28   | June 29                              |
| July 2-6  | July 2                                | July 3    | <b>CLOSED FOR HOLIDAY</b>               | July 5    | July 6<br><i>Field Trip (\$4)</i>    |
| July 9-13   | July 9                                | July 10   | July 11<br><i>Field Trip (\$6)</i>      | July 12   | July 13                              |
| July 16-20  | July 16                               | July 17   | July 18<br><i>Field Trip (\$8)</i>      | July 19   | July 20                              |
| July 23-27  | July 23<br><i>Field Trip (no fee)</i> | July 24   | July 25                                 | July 26   | July 27                              |
| July 30 – August 3<br><i>\$25 Performance Fee</i> | July 30                               | July 31   | August 1                                | August 2  | August 3<br><i>Show (\$25)</i>       |
| August 6-10                                       | August 6                              | August 7  | August 8<br><i>Field Trip (\$3)</i>     | August 9  | August 10<br><i>Sleepover (\$32)</i> |
| August 13-17                                      | August 13                             | August 14 | August 15<br><i>Field Trip (no fee)</i> | August 16 | August 17                            |
| August 20 – 24                                    | August 20                             | August 21 | August 22                               | August 23 | August 24                            |

**\*August 10 Overnight Stay Option**

Our 'Superstar Sleepover Party' will be held on Friday, August 10. Girls will have an evening of fun with friends while parents enjoy a night out. Girls must bring pajamas, a sleeping bag (or blanket), flashlight and pillow. We supply dinner on Friday, evening snacks and Saturday morning breakfast. Pick-up must be before 10:00am on Saturday morning. Cost (in addition to daily tuition) is \$32.00 and must be paid in advance. In signing below, guardian is granting permission for Cecil Dancer staff to chaperone their child overnight. You understand that Cecil Dancer cannot be held responsible for conditions beyond their control. In the event that emergency medical care is required, guardian permission is also granted.

1. Total number of full weeks circled above: \_\_\_\_\_ x \$ 25.00 deposit = \$ \_\_\_\_\_
  2. Total number of individual days circled above: \_\_\_\_\_ x \$ 10.00 deposit = \$ \_\_\_\_\_
  3. \_\_\_\_\_ Yes, my child will participate in the overnight stay on August 10 x \$ 32.00 = \$ \_\_\_\_\_  
 \_\_\_\_\_ No, my child will not participate in the overnight stay on August 10
  4. **Non-refundable Registration Fee (per family)..... \$ 30.00**
  5. Field Trip Fees/Performance Week Fee (please reference above pricing) ..... \$ \_\_\_\_\_
  6. Pizza Lunch Party each Thursday (optional) \_\_\_\_\_ (# lunch parties) x \$ 3.00 = \$ \_\_\_\_\_
- Total amount due with registration (add the totals of number 1, 2, 3, 4, 5, & 6) \$ \_\_\_\_\_**

**WAIVER AND RELEASE:** My signature below releases Cecil Dancer Inc., Cecil Fitness Center, Cecil Dance Theatre and Cecil Junior Dance Troupe (herein known as The Companies); it's officers, directors, staff, employees, independent contractors, volunteer helpers, and landlords from any and all liability that may result from myself, my children, or any member of my family participating in dance lessons, exercise classes, rehearsals, camps, workshops, parties, private lessons, performances, field trips, or any function sponsored by The Companies. I am participating upon the express agreement and understanding that I am here by waiving and releasing The Companies from any and all claims, costs, liabilities, expenses or judgments, including attorney's fees and court costs arising out of my participation in The Companies' programs or any illness or injury resulting there from, and thereby agree to indemnify and hold harmless The Companies from and against any and all claims. I understand that it is my responsibility to consult with a physician prior to and regarding participating in classes at The Companies. As the parent/legal guardian, I authorize all staff to act for myself or my child according to their best judgment in arranging for emergency care requiring medical attention and that my child may be transported by ambulance and admitted to any hospital or medical facility for diagnosis and treatment and I agree to pay for and hold The Companies and its representatives harmless in their execution of this action. Additionally, I hereby agree to individually provide all possible future medical expenses which may be incurred by me or my child as a result of any injury sustained while participating at The Companies. Further, I authorize instructors to use kinetic correction that may include physically manipulating of myself or my child in an appropriate manner to assist in the proper alignment and execution of dance or exercise steps. I understand that The Companies are not responsible for the supervision of students before or after classes and it is The Companies policy that while under the supervision of the school, no child is allowed to leave the building without written permission of a parent/guardian and that the parent/legal guardian assumes full responsibility for the actions and behavior of the child. I further understand that Cecil Dancer's premises are equipped with audio/video surveillance systems and that my or my child's actions may be video/audio recorded. I realize that surveillance equipment will not be used in private areas. I also give my permission for The Companies to use photographs and/or video of myself or my child without payment, for publicity and advertisement purposes. I understand that anyone found to be disruptive to either another individual or group may be asked to leave the premises and be refused re-entrance in our programs. I hereby execute and deliver the Waiver and Release to induce The Companies to permit me to participate in its program. IN WITNESS WHEREOF, I have executed this waiver and have read and understood this assumption of risk, waiver of liability and medical authorization which will remain in effect as long as I remain a participant at The Companies.

SIGNATURE (Parent or Guardian) \_\_\_\_\_ DATE: \_\_\_\_\_