

## U. S. Royal Martial Arts Academy

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**Spring Break Camp Information**

From : Mar. 25to Apr. 2, 2013 (7 Days)

Time : Half Day (8:00AM ~ 1PM) or (12:00PM ~ 4:30PM)

All Day (8:00AM ~ 4:30PM)

|  |  |
| --- | --- |
| Spring Break Camp Daily Schedule | |
| **TIME** | **ACTIVATE** |
| 8:00am | We Open At 8:00AM (Drop Off) |
| 9:30am | Abacus Mental Math |
| 10:30am | Snack / Free Time |
| 11:00am | Tae Kwon Do |
| 12:00n | \*\*Lunch |
| 1:00pm | Movies / Swimming / Games / Museums / Table Tennis / Chuck E. Cheeses / Bowling / Etc. |
| 4:00pm | Pick Up(by 4:30pm) |
| \*\* Schedule may be subject to change.  \*\* Please bring your own Lunch and snack. | |

Tuition And Limitation

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Day(s)** | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| **Date** | *3/25* | *3/26* | *3/27* | *3/28* | *3/29* | *4/1* | *4/2* |
| **Half Day** | *49* | *79* | *99* | *129* | *159* | *179* | *199* |
| **All Day** | *79* | *119* | *149* | *179* | *199* | *229* | *249* |

***\*\*Fees for activities, outside the school, are also included in tuition price. Admission fees for Six Flags theme park are not included in the tuition price. Parents are encouraged to purchase a season pass from sixflags.com for unlimited admission to the park between now and the end of Summer Camp.***

*ASK for a registration form if you are interested in our Spring Break Camp!!*

**2013 SPECIAL Spring Break Camp RESISTRATION FORM**

Buyer/Parent Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Students Name: 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. ­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth:   1. \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Age\_\_\_\_\_ ­ 2.\_\_\_\_/ \_\_\_\_/\_\_\_\_\_\_ Age\_\_\_\_\_\_ 3.\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_ Age\_\_\_\_\_\_

Health Condition (List any physical defects and all allergies):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you been hospitalized in the last three years?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, then please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any medical problems such as epilepsy, diabetes, high blood pressure, or asthma?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, then please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FEE SCHEDULE: Register for \_\_\_\_\_\_ Days (Check the dates below)**

**1st day 3/25    (   )**

**2nd day 3/26      (   )**

**3rd day   3/27      (   )**

**4th day 3/28       (   )**

**5th day 3/29       (   )**

**6th day 4/1        (   )**

**7th day 4/2        (   )** **Total Camp Fee $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# Consent and Release Form\*\*

I, the undersigned member, hereby acknowledge that I am aware of the strenuous physical exercise involved in the participation of the Children’s Spring Break Camp given by the sponsors.  I hereby consent to hold the sponsors free of any and all liability, claims, or actions whatsoever, arising from any injuries, accidents, illness, etc., due to the attendance of the U.S. Royal Martial Arts Spring Break Camp.

I hereby consent to allow the sponsors to take such actions as is necessary to contact and provide emergency and medical assistance.

This agreement also serves as permission for U.S. Royal Martial Arts Academy(USRMA) to transport my child between USRMA and various local activities and to apply any and all emergency medical health care should the situation arise.

I understand and agree that the school, the owners, operators, or persons in charge of such establishment, or employees will not be held liable for any injuries, damages, loss, etc. Also, the student(s) and/or buyer understand and agree that all activities are taken at his/her own risk.

The undersigned, I will follow the Rules of U.S. Royal Martial Arts Academy.

**Cancellation Policy:**

\*\*It is understood and agreed upon that no payment will be refunded or credited to the student or buyer for any reason.

Buyer Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_