

NCMACC MUSIC SUMMER CAMP

2014 REGISTRATION FORM

STUDENT INFORMATION (all areas required to fill out)

Student Name: _____ Date of Birth: _____

Home Address: _____ City: _____

State: _____ Zip: _____ Attending School Name: _____

Daytime Phone: _____ Alternate Phone: _____

E-mail Address: _____

PROGRAM DATE & TIME

_____ July 14 – July 25 (M–F) 9:00am - 1:00pm (2 weeks) (\$250)

All sessions are designed for children ages **6 – 11 years old.*

All registrations for the Summer Camp must be accompanied by a non-refundable deposit of \$60/child. (Check or Cash Only) The full balance is due by July 3: Late fee of \$25/child for balances after June 8. Your non-refundable deposit will be applied towards your Summer Camp balance.

EMERGENCY CONTACTS

Whom should we contact if you can't be reached?

1. _____ Relationship _____ Phone: _____

2. _____ Relationship _____ Phone: _____

IMPORTANT POLICY NOTES

- Applications are accepted as "first-come, first-served" basis. Spaces cannot be reserved, without both completed application form and emergency medical form.
- It is parents'/guardians' responsibility that your child(ren) to be **a)** sent with lunch & snack everyday, **b)** dropped off and picked up on-time, **c)** refrained from coming in the session with illness; and **d)** contacting us with absent notice.
- Before and after the class, children shall not be left unattended. The NCMACC does NOT assume responsibility for unattended child(ren).
- This is a public music, art and culture center. Improper behavior, excessive noise or damage to the property will not be tolerated. Such action(s) will be immediately discouraged.

PHOTO CONSENT AND RELEASE

From time to time, Northern California Music & Art Culture Center, or its designated photographer, photographs the students during various activities, for use in NCMACC publicity materials. NCMACC will not list the name of any student without the express written consent of the parent for a specific purpose.

I, _____ (parent/guardian), do _____ do not _____ consent to this **Photo Release allowing my child's photograph to be taken during class activities.** I grant permission to NCMACC to use my child's image, either individually or in group photos of students, for use in NCMACC publicity materials for general publicity, including, but not limited to, use in brochures, newsletters, flyers, press kits, press releases, and the NCMACC website.

I do hereby agree to the above stated statements and conditions.

Student's Name: _____

Parent/Guardian Name: _____

Signature: X _____ Date: _____