

2020 Summer Camp Registration Form

Student's First Name: _____ Last Name: _____ Age _____

Birthdate: _____ male female School _____ Grade (Fall 2019) _____

Parent/Guardian: _____ Primary Phone # _____

Street Address: _____ Secondary Phone # _____

City: _____ State: _____ Zip Code: _____ Email(s): _____

Week: ____ AM: _____ PM: _____ Fees: _____

Week: ____ AM: _____ PM: _____ Fees: _____

Week: ____ AM: _____ PM: _____ Fees: _____

Week: ____ AM: _____ PM: _____ Fees: _____

Week: ____ AM: _____ PM: _____ Fees: _____

Week: ____ AM: _____ PM: _____ Fees: _____

Early Drop-Off/Late Pick-Up Fees (\$25 per week): _____

8-Week Classes/Private Lessons: _____ Fees: _____

_____ Fees: _____

Notes _____

Accepted payment methods: Cash, Check made out to OCSAC, Visa, MasterCard & Discover

Payment/Refund Policy Camps: \$50 nonrefundable deposit due at registration to reserve your spot. Balance due the first day of camp. 8-week classes & Private Lessons: Payment in full due prior to first class/lesson. Refunds are given only in cases of medical emergency or because of cancellation due to insufficient enrollment.

Discount Policy OCSAC offers a 10% discount for each additional class in which a student is enrolled and for additional family members enrolled in the same class, within the same quarter. Discount will be taken from the lesser valued class.

*Please visit our website for complete policy information.

Waiver/Liability Agreement The above enrolled student has my permission to participate in classes and/or lessons at the Oldham County Schools Arts Center (OCSAC). I understand that participation in this program is at my/his/her own risk and that OCSAC will not be liable for any injury sustained or be responsible for any medical expenses incurred as a result of my/my child's participation in this class. I understand and accept the policies of OCSAC as stated on this form and on their website and accept responsibility for charges and fees incurred. I will allow OCSAC to use photographs, artwork and recordings made at OCSAC involving the student.

*I will complete the separate **Participation Permission Form** prior to the start of camps and understand that registration is not complete and my spot is not reserved until the form has been received by the office. **Initials:** _____ **Date:** _____

Parent/Guardian Signature _____

Date: _____