



Summer Camp - Fairfax, VA Registration Form 2019

ID D00

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Student 1 Name: _____ Gender ___ DOB ___/___/___ Grade in Fall 2019: ___
 Current US Arts weekly art class student? Yes No

Student 2 Name: _____ Gender ___ DOB ___/___/___ Grade in Fall 2019: ___
 Current US Arts weekly art class student? Yes No

Address _____ City _____ State ___ Zip Code _____

E-mail: _____

Mother's Name _____ Mother's Cell Phone (_____) _____ - _____

Father's Name _____ Father's Cell Phone (_____) _____ - _____

CAMP PRICE INFORMATION		Student 1		Student 2		
Dates	Whole Week	Camp	Early Discount*	Camp	Sibling Discount*	Early Discount*
<i>example</i>		\$250	-\$10	\$250	-\$10	-\$10
7/8 – 7/12	\$300					
7/15 – 7/19	\$250 / \$280					
7/22 – 7/26	\$250 / \$280					
7/29 – 8/2	\$250 / \$280					
8/5 – 8/9	\$250 / \$280					
8/12 - 8/16	\$250 / \$280					
8/19 – 8/23	\$300					
SUBTOTAL						
+ REGISTRATION FEE (\$25)*						
TOTAL						

***PAYMENT & REFUND POLICIES**

- **Payment via check/cash is needed to reserve a space for your child. No exceptions.**
- **Registration Fee:** \$25/student, **waived if registered before May 1st.**
- **Early discount:** -\$10/week/child if registered before **May 1st.** Additional weeks registered after May 1 do not receive early discount.
- **Sibling Discount:** -\$10/week off for additional siblings registering for the same full week.
- **Lunch:** Parents need to pack lunch for their child. We have a refrigerator and a microwave.
- **No refunds and no make-up for absences.** Detailed **Cancellation Policy found on website.**

WRITE & MAIL CHECKS TO: US Arts Center, 2929 Eskridge Road, Unit F, Fairfax, VA 22031



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In case of emergency, we, USARTS Center, have authorities to search emergency care for the kids listed above.

I hereby waive all rights and claims against the US ARTS Center and its team members for any liability resulting from my child's participation of any indoor & outdoor events organized by US ARTS Center.

Parent/Guardian Signature _____

Date ___/___/2019

FOR OFFICE USE ONLY

Date	Amount Paid	Check #	Balance	Processed By