



# 2015 MUSICMAKERS! SUMMER CAMP REGISTRATION FORM

PLEASE PRINT (submit 1 form per enrollee when you register)

1. CAMPER FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_
2. BIRTHDAY \_\_\_\_/\_\_\_\_/\_\_\_\_ GRADE JUST COMPLETED \_\_\_\_\_ TODAY'S DATE \_\_\_\_/\_\_\_\_/\_\_\_\_
3. SCHOOL ATTENDED THIS YEAR \_\_\_\_\_
4. ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_
5. HOME PHONE (\_\_\_\_) \_\_\_\_\_ HOME EMAIL \_\_\_\_\_  
(WILL NOT BE SHARED; FOR KEEPING YOU INFORMED OF CAMP EVENTS ONLY)
6. MOTHER'S NAME\* \_\_\_\_\_ MOTHER'S CELL PHONE # \_\_\_\_\_
7. FATHER'S NAME\* \_\_\_\_\_ FATHER'S CELL PHONE # \_\_\_\_\_  
(\*DO NOT LIST IF MOTHER/ FATHER DOES NOT HAVE CUSTODY)
8. EMERGENCY CONTACT 1 NAME \_\_\_\_\_ EMERGENCY PHONE # (\_\_\_\_) \_\_\_\_-\_\_\_\_
9. SPECIAL INFORMATION (MEDICATIONS, ALLERGIES, CUSTODY, GROUP WITH WHO..., ETC.):  
\_\_\_\_\_
10. CAMPER MUSIC/ARTS EXPERIENCE: \_\_\_\_\_
11. CAMPER'S HEALTH INSURANCE CO.: \_\_\_\_\_ POLICY # \_\_\_\_\_  HERE IF NO INSURANCE
12. CIRCLE AS APPROPRIATE: CAMPER WILL ATTEND (CIRCLE 1 or more per row)\*:  

SESSION I (6/15-7/2-3 wks, closed 7/3)	SESSION II (7/6-7/17- 2 wks)	WK(S) OF (LIST DATES): _____
REGULAR HOURS 8:30AM-2:30PM	or	EXTENDED HOURS 8AM-5:30PM

*\*TUITION: Session I=\$350; II=\$240; Weekly Rate \$125; Paid at CS Gym. Cash Supply Fee (\$10/wk/child) & optional Extended Hrs (\$25/week) paid at Orientation/Day 1. Call 954-868-5515 to reserve your Ext. Hrs spot.)*
13. CAMPER GENDER:                      MALE                      FEMALE
14. CAMPER T-SHIRT SIZE:              YOUTH SIZES- MED./LG.    ADULT SIZES- SM./MED./LG./ XL



**WHAT IS YOUR PASSWORD?**  
 \_\_\_\_\_ (In case someone other than listed designees must pick up child, you/they must give correct password for child to be released.)

**★ MEDIA RELEASE- Required- Sign to Indicate Agreement:**  
 I agree to allow my above-named child/ward, to be recorded (audiotaped, videotaped, photographed, etc.) while participating in **MusicMakers!** activities during summer (year) \_\_\_\_\_. I understand that such recordings may be used to publicize camp events in future newspapers, websites, radio, television, etc.

\_\_\_\_\_  
 Parent/Guardian Signature

**★ TRANSPORTATION DESIGNEE- (optional) Please Print:**  
 I hereby give permission for \_\_\_\_\_ to transport my child on the following date(s): \_\_\_\_\_. *To ensure my child's safety, I will remind my designee to bring photo identification.* At pick-up time, I can be reached at (\_\_\_\_) \_\_\_\_-\_\_\_\_\_.

\_\_\_\_\_  
 Parent/Guardian Signature                      Date