

BALLET SPARTANBURG

2019 SUMMER CAMPS & WORKSHOPS

REGISTRATION FORM

Basic Information:

- For a fun and safe camp experience, wear the proper dance wear for each camp.
- Pack a snack and water for each camp session.
- Cellphones and electronic devices are prohibited at camp. These items distract from the learning environment.

Camper's Name: _____ Age: _____

Parent/Guardian Name: _____

Cell Phone: _____ Day Phone: _____

Address: _____

City, State, Zip: _____

Email Address: _____

Emergency Contact Name/Number _____

Allergies/Additional considerations we should know: _____

<u>Date(s) of Camp:</u>	<u>Camp Requested:</u>	<u>Camp Fee:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Camp total: \$ _____

I hereby give approval for my child to participate in Ballet Spartanburg activities during the above date(s), and release Ballet Spartanburg and personnel from any responsibilities for accident or injury resulting from any negligent act of the above child. I also agree to allow my child to be photographed and used in Ballet Spartanburg materials.

Parent/Guardian Signature and Date:

Please mail this registration form with payment (Check or Credit Card) to:
Ballet Spartanburg/Summer Camps
200 E. St. John Street
Spartanburg, SC 29306

MC VISA AMEX CHECK

NAME ON CARD

CREDIT CARD NUMBER _____ CVV _____

EXP. _____ ZIP CODE _____

Refund Policy: 10 days prior to camp date, 75% refund less a \$10 handling charge. 3-9 days prior, 50% refund less a \$10 handling charge. <3 days prior, no refund. Please note: If camp does not reach the minimum number of required campers by 3 weeks prior to the start date, Ballet Spartanburg reserves the right to cancel the camp and refund 100% of tuition.