



2015 Summer Camp (Ages 6-12)

Name of Child:		Age:	
Guardian Name:			
Address:		City:	State:
Phone Number:		E-mail:	
Emergency Contact Name:			
Phone Number:		Relationship to Student:	
Any allergies/medical concerns?			
Full Day 9:00 am – 3:00 pm 1 week: \$300 (\$270 members) <i>Student will be responsible for own lunch.</i>		Half Day 9:00 am – 12:00 pm 1 week: \$150 (\$135 members)	
Minimum enrollment: 8 Campers / Maximum enrollment 20 Campers per week. Check the box for each session desired.			
Full	Half	#	Dates
		Week 1	June 15-19
		Week 2	June 22-26
		Week 3	June 29-July 3
		Week 4	July 6-10
		Week 5	July 13-17
		Week 6	July 20-24
		Week 7	July 27-Jul 31
		Week 8	Aug 3-7
		Week 9	Aug 10-14

Registration Requirements:

1. Complete this form. Please note that registration preference will be given to families registering for full day camps and/or are members of North Branch Arts. To learn more about membership visit northbrancharts.org.
2. Full payment is required to secure your spot for each week.
3. Mail or drop off forms and checks to 5421 West Devon Chicago, IL 60646

Childs Name: _____

I hereby release North Branch Arts, its agents and employees from all liability for personal injury, illness or property damage occurring on or off the center's premises. I have read the registration information and understand that I am responsible for the related payments as described. I certify that my child is in good health and capable of participating in all camp classes. I hereby give permission for North Branch Arts for my child to go on walks with the program instructors, participate in classes in the neighborhood and be included in photographs for promotional use for the program.

Parent/Guardian Signature

Date