

CAMP

CREATIVE ARTS AND MUSIC PROGRAMS
APPLICATION 2012

PLEASE WRITE LEGIBLY!

1

Please indicate which program you would like to attend. We are currently offering three 2-week programs, four-week programs, and a full six-week program.
CAMP meets daily from 8:30am-3:00pm.

Student registration

- TWO-WEEK A: JULY 2—JULY 13 - \$850 FOUR-WEEK A: JULY 2—JULY 27 - \$1400
 TWO-WEEK B: JULY 16—JULY 27 - \$850 FOUR-WEEK B: JULY 16 - AUG 10- \$1400
 TWO-WEEK C: JULY 30 - AUG 10 - \$850 SIX-WEEK - \$2025

Returning Campers registration

- One session - \$750 Two sessions - \$1200 Three sessions - \$1800

Please indicate session(s): _____

Sibling registration

- One session - \$650 Two sessions - \$1100 Three sessions - \$1700

Please indicate (sessions): _____

***Feel free to inquire about our scholarship availability.**

2

Name: _____

Gender: M | F

Address: _____

Telephone: (____) _____ Cell Phone: (____) _____

Email: _____

Age: ____ DOB: _____ T-shirt size: Child S M L XL Other _____

I Live With:

____ Parent ____ Foster Parent ____ Relative ____ Group Home ____ Legal Guardian

Whose Name Is: _____

You must provide us with all adult contacts you may have as applicable below:

Name: (Sibling) _____

Gender: M | F
Address:

Telephone: (____) _____ Cell Phone: (____) _____

Email: _____

Age: ____ DOB: _____ T-shirt size: Child S M L XL Other _____

3

Emergency contact: _____

Telephone: (____) _____ Email: _____

Cell phone: (____) _____

Person dropping you off and picking you up at CAMP:

Telephone: (____) _____

Cell phone: (____) _____

Caregiver:

I have the authority to and do consent to the above student attending Creative Arts and Music Programs 2012. I recognize this is a day CAMP and I agree to comply with CAMP rules and regulations to ensure the student arrives on time, with appropriate clothing and necessary supplies, and is picked up promptly upon completion of the CAMP day. I release and hold harmless CAMP's administrators, agents, representatives, and employees from all claims, damages and other liability for injury to the student or for loss of student property, where such claims, damages or other liability are not the result of gross negligence by CAMP's administrators, agents, representatives, and employees.

Signature: _____

Printed Name: _____ Date: _____

Student:

I want to attend Creative Arts and Music Programs 2012 and, if selected, I agree to comply with all CAMP rules and regulations. I promise to participate fully in art workshops and activities and to apply myself creatively and with all my energy.

Printed Name: _____ Date: _____

Student: (Sibling)

I want to attend Creative Arts and Music Programs 2012 and, if selected, I agree to comply with all CAMP rules and regulations. I promise to participate fully in art workshops and activities and to apply myself creatively and with all my energy.

Printed Name: _____ Date: _____

Please send:

____ a completed application

____ \$300 Deposit (for each child)

Address to:

Creative Music Programs, Inc.
Attn: Seth Ginsberg/Director
143 Jackson Street, #1A
Brooklyn, NY 11211

- **PLEASE NOTE: A \$300 deposit must be paid for each session that a child attends. In consideration of the camper's enrollment, and the payment of the appropriate fees, CAMP agrees to reserve a place for the summer of 2012. Final balance is due and payable no later than June 1, 2012. If payments are not received as scheduled, then application is subject to cancellation.**

Refund Policy: There are no refunds of any kind for late arrivals, early withdrawals, non-arrivals, or dismissal. All fees and balances are completely refundable **upon written request** prior to June 1st, 2012. Thereafter there will be NO refunds.

Questions?

For more information, contact:
Seth Ginsberg
Director, Creative Music Programs
646 284 4033
www.creativemusicprograms.com