

Summer Art Camp Registration Form

2022

Iredell Arts Council

203 S. Meeting Street, Statesville, NC 28677

Advanced registration is required. Class sizes are limited. \$50 payment due upon registration. Registration closes June, 23rd, 2022. Make checks payable to Iredell Arts Council.

Pricing: \$100 + \$50 material fee

Final payment made on / /

Cash

Check#: _____

Acceptance to Program: Acceptance to the program is at the discretion of the instructor.

Refund Policy: A partial refund less a \$20 nonrefundable fee applies to any cancellations or students dropped from the camp. Camp director reserves the right to drop any student if it is deemed necessary. No refunds will be available after 6/24/22.

Summer Camp Info: Camp runs from June 27th-July 1st with a closing reception on June 30th from 5-6pm. Camp is for rising 1st-12th graders. Class for 1st-5th grades runs from 9am-12pm. Class for 6th-12th graders runs from 1pm-4pm. Students must currently be enrolled in school to participate. Students must be signed in and out of the building. No transportation will be provided. Lateness in picking up students will result in their being dropped from the camp with a partial refund. Behavioral misconduct will result in communication home. If behavior does not improve, students will be dropped from the camp.

AGREEMENT REGARDING PARTICIPATION, ASSUMPTION OF RISK, WAIVER AND RELEASE OF LIABILITY

The purpose of this Agreement is to enable parents and students to give informed consent for a student to participate in Summer Art Camp and to confirm the agreement of the student and the parents regarding assumption of risks, waiver and release of liability, as a condition of the student's participation in this program. This agreement also provides for consent regarding any photographs, publication and media coverage related to this program.

RISKS: I agree and understand that there are some risks (some known and others unknown or unforeseeable) associated with participation in this program. These risks include the possibility of injuries or illness which can occur for a variety of reasons and under a variety of circumstances.

Student's Name: _____

Age: _____ Birthdate: _____ Grade for 2022-23 School Year: _____

School Currently Enrolled In: _____

Parents or Guardians Full Name: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Emergency Contact: _____ Phone: _____

Alternate Emergency Contact: _____ Phone: _____

Health Information: Allergies: _____

Medical Conditions: _____

I understand that the camp directors assume no liability. We agree to follow all camp rules and regulations. I agree that my child and their artwork may be photographed for press/publicity.

Date: _____ Signature Parent/Guardian: _____