



## SUMMER CAMP REGISTRATION

Name of Dancer: \_\_\_\_\_  Female  Male

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Medical Data: \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

July 8-12/19(Windsor reg camp)  July 15-19/19(LaSalle reg camp)  July 22-26/19>(\*Windsor reg/intensive camp)

July 29-Aug 2/19(LaSalle reg/intensive camp)  Aug 12-16/19(Windsor reg/intensive camp)  Aug 19-23/19(Windsor/LaSalle reg camp)

Half Day (9am-12pm, 3.5-6yrs, \$120/wk)

Full Day (9am - 3pm, 6+ years, \$190/wk, \$160/wk for additional weeks)  Regular  Intensive (full day only)

Cash  Cheque  E-transfer

**TOTAL:** \_\_\_\_\_ Paid By: \_\_\_\_\_ Date of Payment: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

## IN CASE OF EMERGENCY

Emergency Contact #1: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Relationship to Dancer: \_\_\_\_\_

Emergency Contact #2: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Relationship to Dancer: \_\_\_\_\_

(Office Use Only)

## RECEIPT FOR SUMMER CAMP AT CATHY'S DANCE STUDIO

Name of Dancer: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

July 8-12/19(Windsor reg camp)  July 15-19/19(LaSalle reg camp)  July 22-26/19(\*Windsor reg/intensive camp)

July 29-Aug 2/19(LaSalle reg/intensive camp)  Aug 12-16/19(Windsor reg/intensive camp)  Aug 19-23/19(Windsor/LaSalle reg camp)

Half Day (9am-12pm, 3.5-6yrs, \$120/wk)

Full Day (9am - 3pm, 6+ years, \$190/wk, \$160/wk for additional weeks)  Regular  Intensive (full day only)

Cash  Cheque  E-transfer

**TOTAL:** \_\_\_\_\_ Paid By: \_\_\_\_\_ Date of Payment: \_\_\_\_\_

Cathy's Dance Studio Signature: \_\_\_\_\_