



SUMMER CAMP 2011 REGISTRATION FORM

(Fill out completely)

Student's Name _____ Age _____

Date of Birth _____ Current Dance School _____

Years Trained _____ Current Level _____

Mother's Name _____ Father's Name _____

Street Address _____

City _____ Zip _____

Home Phone _____ Cell _____

Email _____

Emergency Contact _____

Preferred Hospital _____

Doctor _____ Phone _____

Allergies _____

CHECK WEEKS OF ENROLLMENT

_____ June 13-17 _____ July 4-8 (July 4th Holiday) _____ July 25-29

_____ June 20-24 _____ July 11-15 _____ Aug 1-5

_____ June 27- July 1 _____ July 18-22

FEES:

Dance Camp Tuition: Weekly Rate \$195.00 Daily Rate: \$50.00

A non-refundable deposit of \$100.00 for each week enrolled must be returned along with this registration form. Deposits will be applied to the weekly camp fee. A remaining balance of \$95.00 will be due on the first day of camp.

Please check one:

- I will pay with cash
- I will pay with credit card



CC# _____ Exp. Date _____ 3 dig sec code _____

Return this form with payment to:
In Motion Performing Arts Center
4700 Biscayne Blvd
2nd floor
Miami, FL 33137