

DFAC Summer Art Academy **2017** Registration Form *(one form per camper)*

Fax form to: 727-298-3326 or Email to: Shannon@dfac.org

Campers Name \_\_\_\_\_

DOB\*    /    /    \*Required Age    Gender    School   

Phone (cell) \_\_\_\_\_ (work) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Allergies or health conditions: \_\_\_\_\_

Parents/Guardians PRINT \_\_\_\_\_

\*Parent Signature *(required)* \_\_\_\_\_

I authorize the following persons to **pick up** my child: \_\_\_\_\_

Grouping is available by advance written request and only if age appropriate, children must be the same age. Group my child with: \_\_\_\_\_

**PAYMENT:**

CC# \_\_\_\_\_

Exp. Date \_\_\_\_\_ Code \_\_\_\_\_ CC Type \_\_\_\_\_

Check # \_\_\_\_\_ \$ Amount \_\_\_\_\_

Email (Required) \_\_\_\_\_

Alternate Emergency Contact\* \_\_\_\_\_

phone \_\_\_\_\_

\*Parents will be contacted first, in case they cannot be reached list an alternate



Sessions	Full Day Camps Tuition	Mini Masters	SSV Visual Arts	I Pad	Arts In Motion	Mural Madness	Art Squad Tuition	DFAC Family Member Discount \$20 / week	Register Early by April 28 <sup>th</sup> \$10 discount	Sibling Discount \$10 each camper	3 or more weeks discount	March Madness Restrictions apply	Extended Care	Weekly TOTAL	Payment	Balance
									Discounts Not Valid during March Madness or short weeks							
Wk 1- 5/30 – 6/2*	<input type="checkbox"/> 150	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 160	<input type="checkbox"/> -20					<input type="checkbox"/> +35			
Wk 2- 6/5 – 9	<input type="checkbox"/> 185	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 195	<input type="checkbox"/> -20	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/> -35	<input type="checkbox"/> +40			
Wk 3- 6/12 - 16	<input type="checkbox"/> 185	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 195	<input type="checkbox"/> -20	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/> -35	<input type="checkbox"/> +40			
Wk 4- 6/19 – 23	<input type="checkbox"/> 185	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 195	<input type="checkbox"/> -20	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/> -35	<input type="checkbox"/> +40			
Wk 5- 6/26 – 30	<input type="checkbox"/> 185	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 195	<input type="checkbox"/> -20	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/> -35	<input type="checkbox"/> +40			
Wk 6- 7/3 – 7	<input type="checkbox"/> 185	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 195	<input type="checkbox"/> -20	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/> -35	<input type="checkbox"/> +40			
Wk 7- 7/10 – 14	<input type="checkbox"/> 185	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 195	<input type="checkbox"/> -20	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/> -35	<input type="checkbox"/> +40			
Wk 8- 7/17 – 21	<input type="checkbox"/> 185	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 195	<input type="checkbox"/> -20	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/> -35	<input type="checkbox"/> +40			
Wk 9- 7/24 – 28	<input type="checkbox"/> 185	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 195	<input type="checkbox"/> -20	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/> -35	<input type="checkbox"/> +40			
Wk 10- 7/31 - 8/4	<input type="checkbox"/> 185	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 195	<input type="checkbox"/> -20	<input type="checkbox"/> -10	<input type="checkbox"/> -10	<input type="checkbox"/> -5	<input type="checkbox"/> -35	<input type="checkbox"/> +40			

\* 4 Day Week

Sub Total

**Office Use Only**

In Book

Family Membership  New  Renew \$65 / 58.50 Dunedin Res

In PC

Scholarship: \_\_\_\_\_

Registered by: \_\_\_\_\_

\*\*Note \$65 member rate valid till April 28. After the 28th, call for new rate

**Release:** By paying for these programs, I acknowledge/release the Dunedin Fine Art Center from any and all liability from any bodily injuries sustained to my children, or for loss or damage of any personal articles, while on the premises or participating in any activity sponsored by DFAC. I further agree that in the event medical attention is required due to accident or illness, The Dunedin Fine Art Center shall be permitted to seek such medical services as it deems necessary and appropriate through EMS/911 and/or local hospitals. DFAC is authorized to take photos/videos (group/individual) for archives, grants, and promotional materials. **Tuition and Deposits are non-refundable.**

**Total Payment Due at time of Registration**

**Remaining Balance**