

DFAC 2026 Camp Information & Registration forms

(One form per camper)

*I would like to purchase a Family Membership to receive 10% off of camps & classes (\$120.00): Yes_____ No_____

Child's Name:_____ Child's DOB:_____ Age:_____ School:_____

Allergies/ Medical Conditions:_____

Parents/Guardians Names (Print): 1_____ 2_____

Primary Address:_____

Primary email:_____

Primary Phone #:_____ Primary Work #:_____

Secondary Phone #:_____ Secondary Work #:_____

Alternate Emergency contact (name/#):_____

(authorized to pick up child with photo ID)

I authorize the following persons to pick up my child from DFAC with photo ID: _____

ALL Camps

\$260.00 per week

\$208.00 wk. 3

(4 day week)(Closed 6/19)

Become a Member:

***10% Discount per
week- per child**

w/Family Membership!*

Release: By paying for these programs, I acknowledge and release the Dunedin fine Art Center from any and all liability from any bodily injuries sustained to my child/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 is deemed necessary and appropriate through EMS/911 and /or local hospitals. DFAC is authorized to take photos/videos (group or individual) for archives, grants and promotional materials. **Tuition is non-refundable.**

Parent/Guardian Signature:_____

[illegible]