



Summer Camp Registration

Please read all information carefully. All requested information must be provided for your camper's registration to be complete.

1. CAMPER INFORMATION			
Camper's Name:		Age:	D.O.B. <input type="checkbox"/> M <input type="checkbox"/> Fe
Parent Name:		E-Mail:	
Street Address:		City, State & Zip:	
Phone (home):		(work):	(cell):
Camper's School:		Camper's Last Teacher:	Grade:
Health Concerns: <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, briefly indicate health concerns below)			
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2. CHILD RELEASE AUTHORIZATION			
I, _____ (parent/guardian signature) authorize BodyMoves, LLC/KidMoves Summer Day Camp to release my child _____ (camper's name) to the following individuals who may pick up my child from camp. I understand that each person must be at least sixteen (16) years old, and that my child will not be permitted to leave the camp with anyone not listed below. All authorized persons will be required to show identification and sign the child out (do not include yourself).			
Name:		Phone Number:	Relationship:
1. _____		_____	_____
2. _____		_____	_____
3. _____		_____	_____
3. SELECTION OF WEEKS		4. DISCOUNT PROGRAMS	
Select the weeks camper will be attending camp. Once camp starts, you are financially responsible for selected weeks whether camper attends or not. <input type="checkbox"/> Week 1 (June 21 – June 25) <input type="checkbox"/> Week 5 (July 19 – July 23) <input type="checkbox"/> Week 2 (June 28 – July 2) <input type="checkbox"/> Week 6 (July 26 – July 30) <input type="checkbox"/> *Week 3 (July 5 – July 9) <input type="checkbox"/> Week 7 (August 2 – August 6) <input type="checkbox"/> Week 4 (July 12 – July 16) <input type="checkbox"/> Week 8 (August 9 – August 13)		The following discount programs are available. <input type="checkbox"/> Pay Total in Full – \$100 Off if all 8 weeks of camp are paid on or before the first day of camp. <input type="checkbox"/> Additional Siblings – \$10 off weekly tuition for each additional sibling after the first child.	
A minimum of two (2) weeks must be selected for registration to be processed. *Camp closed Monday, July 5, 2010		6. CREDIT CARD PAYMENTS (by Fax/Mail)	
5. COST/FEES Ages 3 ½ – 5 years: \$160.00/week (6:30am – 7:30pm) Ages 6 – 13 years: \$150.00/week (6:30am – 7:30pm) <u>Registration Fees (non-refundable):</u> Before May 1, 2010 \$75.00 After May 1, 2010 \$100.00 First and last week camp tuition must be paid in full by the camper's first day. Weekly camp tuition is due each Monday morning at drop off. No Exceptions.		<input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> American Express <input type="checkbox"/> Discover Acct # _____ Exp. Date: ____ - ____ - ____ Provide 3 digit security code from the back of your card: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____ Signature as shown On Credit Card	
7. PAYMENT OPTIONS		Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Full Name (print): _____ (Print your full name as it appears on your card)	
<input type="checkbox"/> Cash (At the center only) <input type="checkbox"/> MC/Visa /Amex/Discover (Fax/Phone) <input type="checkbox"/> Personal Check/Money Order (payable to: <u>BodyMoves, LLC</u>) Mail to: BodyMoves - P.O. Box 441136 Fort Washington, MD 20749 Fax to: 301 292-2037 (Complete section 6 before faxing) There is a \$35.00 fee for all returned checks. For your registration to be accepted, you must include the completed registration form and the registration fee. If the registration fee is not included, your child will not be registered. Camp registration is accepted on a first come, first served basis. Once all camp slots have been filled, registration will be discontinued. Registration fee is non-refundable.		Credit Card Billing Address: Street: _____ City/State/Zip: _____ Telephone: _____ If you prefer, you may fax your registration form and call with your credit card information. Faxed registration forms will only be held for 24 hours without payment. Phone: 301-292-0043	

Both sides of this application must be completed in full for your child's registration to be processed.



