

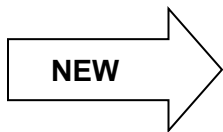


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Session 1: June 5 - 16 Session 2: June 19 – June 30

Produced by the Del E. Webb Center for the Performing Arts in association with the Desert Caballeros Western Museum, Cops Who Care, Wickenburg Sun & Wickenburg Unified School District

REGISTRATION FORM (Begins April 22 and closes when the maximum camper capacity is reached)



The actual cost per child for camp is \$350. Again this year we have adopted a three-tiered fee program. This is an opportunity for you to take an active role in supporting the true cost of the summer arts camp experience. The pricing structure is intended to provide you with the ability to choose the tier that is most appropriate for your family. Tier selection is confidential.

Tier 1: \$100 for the first child; \$80 for siblings. Our historical, fully-subsidized rate which reflects a 71% discount off the actual operating cost of \$350.

Tier 2: \$150 for the first child; \$130 for siblings. A 57% discount off the actual operating cost of Camp Imagination.

Tier 3: \$200 for the first child; \$180 for siblings. A 43% discount off the actual operating cost of Camp Imagination.

OR I am happy to support Camp Imagination and pay the full tuition price of \$350 for my camper(s).

PARENT/GUARDIAN NAME _____

Student Name _____ Next Grade _____ Tuition Tier \$100 / \$150 / \$200 / \$350

T-Shirt Size (Circle One) Child Small Medium Large Adult Small Medium Large Extra Large

Special Attention (Medical Conditions, Allergies, etc. This is really helpful to know in advance so we may best serve your camper.) _____

Student Name _____ Next Grade _____ Tuition Tier \$80 / \$130 / \$180 / \$350

T-Shirt Size (Circle One) Child Small Medium Large Adult Small Medium Large Extra Large

Special Attention _____

Student Name _____ Next Grade _____ Tuition Tier \$80 / \$130 / \$180 / \$350

T-Shirt Size (Circle One) Child Small Medium Large Adult Small Medium Large Extra Large

Special Attention _____

Student Name _____ Next Grade _____ Tuition Tier \$80 / \$130 / \$180 / \$350

T-Shirt Size (Circle One) Child Small Medium Large Adult Small Medium Large Extra Large

Special Attention _____

Mailing Address _____

E-mail Address (to receive daily camp updates) _____

Work/Home Phone # _____ Cell Phone # _____

EMERGENCY CONTACT (other than parent) Name _____

Relationship _____ Phone # _____

For office use only. APPLICATION # _____ SCHOLARSHIP APPLICATION # _____ Amount Awarded \$ _____

Registration Fee: 1 x \$100 / \$150 / \$200 / \$350 + _____ x \$80 / \$130 / \$180 / \$350 = _____

TOTAL DUE: \$ _____ Payment method: Cash Check# _____ Credit VISA MC DISC Date Paid ___/___

PLEASE CHECK BOXES BELOW TO INDICATE THAT YOU AGREE WITH THE STATEMENT:

- I give permission for my child(ren) to enroll and participate in Camp Imagination for the weeks of Session 1: June 5 - 9 and June 12 - 16 or Session 2: June 19 - 23 and June 26 – June 30.
- The student(s) I am enrolling agree to participate fully in Camp Imagination and abide by the rules and regulations that will be enforced during the two-week camp.
- (1) Campers must wear closed toed shoes for their safety.
 - (2) Hats are not allowed to be worn inside buildings.
 - (3) No gum is permitted on campus.
 - (4) Cell phones must be turned off during class time.
- Although different from school, the staff and volunteers of Camp Imagination need to be aware of any special accommodations your camper(s) receive at their school (e.g. 504, IEP) in order to provide the best camp experience for them and the other students.
- I understand the protocol when addressing any disruptive behavior and disciplinary concerns:
- 1) First occurrence – student will be given a verbal warning by the class instructor/volunteer and the issue discuss with the camper.
 - 2) Second infraction – A second occurrence will warrant a call to the student’s parent/guardian indicating the behavior issue and to clarify that if a third incident occurs (within the same day) the parent will be required to pick up the student and he/she will not be allowed to return for the day.
 - 3) Third infraction – The parent will be required to pick up the student from camp and he/she will not be allowed to return to camp. Refunds will not be available.
- I hereby relinquish and assign all rights, title and interest, if any, to photographs taken of my child(ren) and release, indemnify and hold harmless the Del E. Webb Center for the Performing Arts, Cops Who Care and Desert Caballeros Western Museum, it’s officers, directors, agents and employees from any and all claims which may result at any time by reason of their use.
- I understand that payment is due in full upon registration and that if I cancel my child/children’s participation on or before May 12 for Session 1 and May 26 for Session 2, there will be a 50% refund, and that no refunds will be given after this date.
- I give full medical release for the student(s) above in the case of emergency, allowing my enrolled student(s) to receive any necessary medical care in case of an emergency.
- I will not hold the Wickenburg Unified School District, Wickenburg High School, Del E. Webb Center for the Performing Arts, Cops Who Care, Desert Caballeros Western Museum, it’s officers, directors, agents and employees liable for any injury or accidents that might occur during the two-week camp.

I swear that to the best of my knowledge the above statements are complete and accurate.

Signature of parent/guardian

Date

**Please return these forms directly to the Webb Center Box Office to ensure registration.
For questions or more information please call 928-684-6624.**