



2401 Callender Rd., Suite 117  
 Mansfield, TX 76063  
 817-473-2822  
 www.musicplacearts.com

## Summer Camp 2010 - Registration Form

For questions or to confirm registration and pay over the phone: **817-473-2822**  
**OR** visit the studio or mail payment to: 2401 Callender Rd. Suite 117, Mansfield, TX 76063

|   |            |                            |                        |
|---|------------|----------------------------|------------------------|
| Student Name  | Birthday   | Grade (Entering fall 2009) |                        |
| Address   | City       | Zip                        | Home Phone             |
| Parent or Guardian  | Work Phone | Cell Phone                 |                        |
| Medical Information (Please include any known allergies.) |            |                            | Parents E-mail Address |

### *Fine Arts Camp: June 28 – July 2*

- |   |                         |      |
|---|-------------------------|------|
| <input type="checkbox"/> <b>Blast into Piano</b> (5 years & up) | Please circle one: 2:00 | 5:00 |
| <input type="checkbox"/> <b>Rock into Guitar</b> (3rd & up)     | Please circle one: 2:00 | 5:00 |
| <input type="checkbox"/> <b>Dive into Spanish</b> (1st & up)    | Please circle one: 3:00 | 4:00 |
| <input type="checkbox"/> <b>Leap into Art*</b> (1st & up)       | Please circle one: 3:00 | 4:00 |

Please check the CLASSES your child will be attending and circle preferred time.

Each class meets 55 minutes for five days.

*Cost is \$70 for the first class, \$136.50 for two classes (5% discount on second class), \$199.50 for three classes (10% discount on third class) and \$259 for four classes (15% discount on fourth class). (Students attending three or more classes are encouraged to bring a snack.)* Fees include all supplies and books, excluding Leap into Art. \* Please add a \$7 supply fee for Leap into Art.

There is no registration fee. A sibling discount of an additional 5% is available.

Space is limited. Payment must be received in full to reserve placement.

### *Performing Arts Camp: July 12 - 16*

- Performing Arts Camp**

This camp meets 9:00 a.m. to 3:00 p.m. Monday through Thursday. *(Students should bring a sack lunch.)* The week will end with a performance on Friday. Time and place TBA based on camp participation. *Cost is \$260 for the week.* This includes all costumes, props and 4 tickets to the performance.

Additional performance tickets may be purchased for \$5 each.

There is no registration fee. A sibling discount of 5% is available.

***Please sign and review payment options on second page of form.***



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I understand that payment in full is due to reserve my child's place. In case of cancellation, full refunds will be given up to two weeks prior to the camp start date. 50% refund will be given on all other cancellations.

I understand all reasonable safety precautions will be taken at all times by The Music Place & Arts Conservatory and its agents during events and classes. I understand the possibility of unforeseen hazards and know the inherent possibility or risk. I agree not to hold The Music Place & Arts Conservatory and any teachers, employees, and/or volunteer staff liable for damages, losses, disease, or injuries incurred by the subject of this form.

I give permission for my child's photograph to appear in print material or on the Internet. I understand that my child's name will not be used without further permission. If I do not wish my child's photograph to appear, this paragraph will be crossed out.

\_\_\_\_\_  
Parent / Guardian

\_\_\_\_\_  
Date

**PAYMENT OPTIONS:**

Circle one:

Cash    Check    MasterCard/Visa Debit    MasterCard/Visa Credit    Discover    American Express

Total Camp Fees: \$ \_\_\_\_\_ Total payment: \$ \_\_\_\_\_

\_\_\_\_\_  
Card Number

\_\_\_\_\_  
VC Code 3 digits on back

\_\_\_\_\_  
Exp. Date

\_\_\_\_\_  
Print Name on Card

\_\_\_\_\_  
Signature (This is a one-time charge.)

**Student Name:** \_\_\_\_\_ **Camp Date/s & Time/s:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_

**Secondary Emergency Contact:** \_\_\_\_\_

**Sibling name/s (if applicable):** \_\_\_\_\_

**Names of those permitted to pick-up my child from camp:**

\_\_\_\_\_

\_\_\_\_\_