



**How did you hear about us?**

\_\_\_\_\_

## 2010 Summer Camp Registration

Parent Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Alternative Emergency Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Child's Name	Boy/Girl	Birthdate	Camp	Session #	Dates	Fee
<i>10% Sibling Discount</i>						
<b>Total</b>						

**We accept Cash, Visa, Master Card, Checks or money orders payable to: Hooray For Clay.**

Card Holder \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV code \_\_\_\_\_

Account Number \_\_\_\_\_ Billing Zip \_\_\_\_\_ Total Due \_\_\_\_\_

**THIS SECTION MUST BE SIGNED BY PARENT AND/OR GUARDIAN BEFORE REGISTRATION IS ACCEPTED.**

I hereby give permission to Hooray For Clay to transport the child named above off the camp property for the purpose of medical care or program activities as deemed appropriate by the Camp Director. In the event I cannot be reached in an emergency, I give permission to the physician selected by the camp director to hospitalize, secure proper treatment for, and to order injection, anesthetic or surgery for the child named above. I understand that Hooray For Clay does not provide accident/medical insurance for the child named above. Medical bills, including prescription drugs, will be the responsibility of the parent or guardian named below.

Rules for campers are the same for everyone without regard to race, color, national origin, gender or disability. I understand that all campers will be treated as individuals and respect will be shown for a range of abilities and behaviors. I agree that Hooray For Clay reserves the right to dismiss a child from camp whose special needs they are not able to provide for or whose conduct is not in the best interest of the camp community, without refund. I will notify the director if my child has any serious restrictions related to his/her participation in the camp program.

I agree to the following policies regarding camp fees: Deposits are non-refundable; No refunds will be given for canceling within 14 days of my child's camp session; No refunds are given if a camper is dismissed from camp due to disciplinary action; No refunds are given if campers leave early due to sickness or personal commitments. Hooray For Clay reserves the right to cancel any class due to insufficient enrollment. Full refunds are issued for cancelled classes. Students are to be picked up within 20 minutes of the end of your child's camp/class. Additional fees of \$5 per minute will be assigned to any registrant picked up late. I authorize Hooray For Clay to charge any fees due at that time to my credit card on file (if applicable).

Any registration submitted on June 2, 2010 or later must be paid in full at the time of registration. Account balances are due on or before June 1, 2010. I authorize Hooray For Clay to charge any fees due at that time to my credit card on file (if applicable). Any registration submitted on June 2, 2010 or later must be paid in full at the time of registration.

Hooray For Clay has my permission to use photographs taken of my child while at camp for promotional purposes.

**We or I (Parents/Guardians) have read and agree to all the conditions of this registration.**

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**SEND TO: 402 E. Howard Ave. Decatur, GA. 30030.**