

Summer Camp

June 11 to August 3, 2018

Dance, World Music, World Art and More!

Ages: 6 to 12

Full Day and Half Days

(217) 979-7721 - www.urbanafineartscenter.com - info@urbanafineartscenter.com

1. Choose any options listed below.

2. Complete and sign the form on the back.

3. Mail to: Urbana Fine Arts Center 2740 S. Philo Rd, Suite C, Urbana, IL 61802

2017 camp participant.
(5% discount)

Camp Weekly:

- Full Day - 9:00 AM to 4:00 PM \$ 190.00 per week
- Half Day - 9:00 AM to 12:00 PM \$ 95.00 per week
- Half Day - 1:00 AM to 4:00 PM \$ 95.00 per week
- Early Drop off - 8:00 AM \$ 10.00 per day
- Late Pick Up - 5:30 PM \$ 15.00 per day

Indicate Week (s):

- Week 1 - Celebrating Mexico June 11 to June 15
- Week 2 - Celebrating China June 18 to June 22
- Week 3 - Celebrating Italy June 25 to June 29
- Week 4 - Celebrating U.S.A. July 2 to July 6*
- Week 5 - Celebrating India July 9 to July 13
- Week 6 - Celebrating Russia July 16 to July 20
- Week 7 - Celebrating Brazil July 23 to July 27
- Week 8 - Celebrating Africa July 30 to August 3

*Not July 4th

**Options: reading, craft, drawing, research and creative writing.

***World music, world art, foreign language and multicultural presentation

Camp Daily:

Full Day \$60.00 per day
Please, indicate day(s): _____

Half Day Morning \$30.00 per day
Please, indicate day(s): _____

Half Day Afternoon \$30.00 per day
Please, indicate day(s): _____

Schedule:

9:00 to 9:30: Stretch
9:30 to 10:30: Ballet
10:30 to 11:00: Snack & Recess
11:00 to 12:00: Multicultural Dance
12:00 to 1:00: Lunch & Recess
1:00 to 2:00: Activity of choice**
2:00 to 3:30: Class & Workshop***
3:30 to 4:00: Recess & Dismissal



Student's name: _____
Students date of birth: _____
Parent or legal guardian's name: _____
Email address: _____
Phone: _____ Emergency Contact: _____ Phone: _____
Allergies: _____
Pick Up Authorization Names: _____, _____, _____
Payment amount: \$ _____ CASH Check # _____
Credit card #: _____ Name on cc: _____
Exp. Date: _____ CVV2/CID : _____

I acknowledge that the dance classes hold by the URBANA FINE ARTS CENTER involves physical activities and there is a potential for injury and property loss. The risks include, but are not limited to: actions of other people including, but not limited to participants, volunteers, teachers, spectators, coaches, event officials, event monitors and/or producers of the event; lack of hydration; weather; and/or other natural conditions. I hereby assume all of the risks of having me or my child/children participating in any of the URBANA FINE ARTS CENTER classes or events. I certify that my child /children is/are physically fit, have sufficiently trained for participation in the class(es) he/she is registered for and have not been advised otherwise by a qualified medical person.

I acknowledge and accept that the student's participation in activities includes the necessity for the instructor to adjust and correct the student's body form. I am aware that the instructor may, at times, touch the student to correct body position, and I agree such action is necessary and appropriate.

I acknowledge that this Accident Waiver and Release of Liability (AWRL) form will be used by the URBANA FINE ARTS CENTER, and its sponsors, in which my child/children may participate and it will govern my actions and responsibilities at said program.

In consideration of my application and permitting me to have my child/children participate in the URBANA FINE ARTS CENTER, I hereby take action for myself, my child/children, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, release, and discharge from any and all liability for my death, disability personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me as a result of my child/children/ward, participation in its program, or my traveling to and from events, THE FOLLOWING ENTITIES OR PERSONS: URBANA FINE ARTS CENTER and their directors, officers, employees, volunteers, representatives and agents, the events sponsors and events volunteers, (B) indemnify and hold harmless all entities or persons previously mentioned from any and all liabilities or claims made by other individuals or entities as a result of my child/children/ward actions or my action in its classes, programs or events.

I hereby consent to have medical treatment that may be deemed advisable in the event of injury, accident, and/or illness during participation in the program, be given to myself or my child/children/ward.

I understand that during the URBANA FINE ARTS CENTER activities, classes, programs and events, my child/children/ward and myself may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the program holders, producers, sponsors, organizers, and/or assigns. This AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible under the applicable law.

I hereby certify that I have read this document and I understand its content.

Parent or legal guardian printed name: _____
Signature: _____ Date: _____