Mark Spivak's Institute and Dance Extension Summer Dance Camp Registration Form 2017

Camp IJune 19th-J	une 30th; Camp II _	July 10th-Jul	y 21st; Camp III _	July 24th-August 4th	
Location: Julington	Creek 106 J	ulington Plaza,	Jax, zip 32259		
Parent 1					
Home#Work#Cel		Cell#	Emergency#		
Parent 2					
Home#	Work #	Cell	Em	Emergency#	
Address		Zip			
e-mail address print cle	arly				
1.Student First Name	Last_		DOB/	Age	
			T-Shirt size		
2.Student First Name	Last_	 	DOB//	Age	
			T-Shirt size_		
Any medical problems or					
of					
CAMP un refundable Remake checks payable to		35.00pp/55.00 per fa	mily must be turned	in with this form. Please	
June 19th-June 30th_ July 10th-July 21st July 24th-August 4th					
Dance Extension, & Tu	ımbling Kids owners a sonal injury claims ar	and its faculty resp rising through or fr	onsible for acciden om participation i	n activities as a student of	
I,	agree to pay the sses should be return	fee for myself or i ed to Mark Spivak	my child's classes o 's Institute I agree	on the first class. If for any to pay a \$ 20.00 returned	
I here by certify that I l regulations of Mark Sp		_	the payment agree	ment and the rules and	

Date _____

Parent signature _____