

Summer Camp Registration

Please fill out, sign and return to an instructor. This form is for the 2018 Summer Camps.

General Information		
Last Name:	Child 1 Name:	
Child 2 Name:	Child 3 Name:	
Address:		
City:	State:	Zip:
Home Phone:	Work Phone:	
Email Address:		
Name of parent or guardian:		
Signature of parent of guardian:		
Emergency Phone Number 1:		
Emergency Phone Number 2:		
Medication Initials Please list any medication your child is taking at this	time:	
This document is for June - August (July 4th holiday ontegrity Martial Arts, LLC at the end of each day no law Martial Arts, LLC instructors. I do hereby give my permentivities sponsored by Integrity Martial Arts LLC as seform may involve some risk of injury. I further understive, risk, and responsibility. I have had all my question disclosure of what the activities will be from Integrity.	ater than 5:00 PM unless arrangements ission and consent for myself and/or my t forth on this Form. I understand that th tand that I and/or my child(ren) is partic ns answered for me regarding the progra	have been made in writing with Integrit child(ren) to participate in programs and e activity for which I have completed thi ipating at mine and/or his/her own initia
Therefore, in consideration of permission extended to to take part in these programs and activities, I do here ngly and intentionally remise, release, and forever dis Arts LLC and all of its officers, agents and employees, and action on account of any injury or death to my chilorograms or in connection with any activities incident	by for my child, myself, and our heirs, pe charge and agree to hold harmless and acting officially or otherwise, from any a d, or damage to my child's property whi	rsonal representatīves and assigns, know to indemnify and defend Integrity Martia nd all claims, demands, actions, or cause
Emergency Medical Care		
further authorize Integrity Martial Arts LLC, its officers my expense, should it become necessary to do so in th		
have read the above statement and agree to its terms		
Signed By:		Date:



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Weeks Atten	ding Summer Camp (Da	ily hours are 8:00 am	- 5:00 pm)	
Week 1	☐ June 4-8	Week 2	☐ June 11-15	
Week 3	☐ June 18-22	Week 4	☐ June 25-29	
Week 5	☐ July 2, 3, 5,	6 Week 6	☐ July 9-13	
Week 7	☐ July 16-20	Week 8	☐ July 23-27	
Week 9	☐ July 30-Aug	just 3 Week 10	☐ August 6-10	
Activities: D	epending on the camp you sigr	up for, below are so	me of the activities your child may participate	e in.
Exercise: Children	n will be active every day, with r	martial arts drills, stre	tching and flexibility exercises, cardio and hik	king.
Movie Viewing: Y	our child may view movies like	the Karate Kid I II III; I	Cung Fu Panda; The Chinese Connection.	
Art Projects: Chile	dren may paint, create costume	s or participate in ot	ner arts/crafts related projects.	
			some drills, choreographed fighting, weapo supervision of an Integrity Martial Arts instru	
child to appear a	nd act in our video, and for Inte	grity Martial Arts to	ng this form you are giving permission for yo ıse their likeness in future the Integrity Martial Arts channel.	our
•		•	etro area. Each trip will be supervised by an sion for your child to travel to these locations.	
Meals: Each fami morning and mid		bag lunch for their c	nild participants, as well as two snacks for mid	d-
Other Materials:	All children need to bring a wat	er bottle and sunscre	en.	
Name of parent of	or guardian:			
Signature of pare	ent of guardian:		Date:	
Fees By signing this form The fees are as follow	, , , , , , , , , , , , , , , , , , , ,		week your child attends our 2018 summer camps Total Summer Camp Fee	S.
l child	\$150.00 Week/\$45 a day		_ weeks at \$150.00 a week = \$	
2 or more children	25% off per additional child		weeks at \$ a week = \$	
arly Reg. Discount	15% discount before April 15		10% discount before May 15	
ield Trip Fees	Boondocks \$12, Denver Zoo \$12, Butterfly Pavilion \$8, The Bay \$7, Museum of Nature and Science \$12, Dinosau Ridge \$9, Animal Sanctuary \$15 (no discounts)			