



Summer Aikido Camp Registration

This information is considered confidential and is used only to reserve a space in our Summer Aikido Camp. Please fill out all sections completely. If there are any changes to this information, please contact us immediately to update.

PARTICIPANT AND PARENT INFORMATION

Child's Name: _____ Age: _____

Parent /Guardian _____

Contact Information: Phone: ____ - ____ - ____ Cell: ____ - ____ - ____

Email: _____

- Week(s):
- | | | | | | |
|--------------------------|------------|--------------------------|------------------|--------------------------|------------|
| <input type="checkbox"/> | June 2-6 | <input type="checkbox"/> | June 9-13 | <input type="checkbox"/> | June 16-20 |
| <input type="checkbox"/> | June 23-27 | <input type="checkbox"/> | July 7-11 | <input type="checkbox"/> | July 14-18 |
| <input type="checkbox"/> | June 21-25 | <input type="checkbox"/> | July 28-August 1 | | |

(Snacks are provided, but children must bring their own lunch)

Times: 9:30 AM - 3:30 PM Daily \$250 per week

7:30 AM - 5:30 PM Daily \$350 per week

Fee: \$50 Registration fee to reserve your child's space
(This fee is refundable until May 1st, 2008.)

Full payment is due prior to the beginning of the session.