WKA Bellevue Dojo Summer Camp 2018 Registration

Child/Children’s Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age(s): \_\_\_\_\_\_\_\_\_\_\_\_\_

Date(s) of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent’s Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (hm/cell/wk) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (hm/cell/wk)

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency contact (in case parent cannot be contacted):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any special medical conditions, special needs, or allergies (food, medication, etc.) of child/children: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please indicate which camps you are registering for:**

 \_\_\_\_ full day (9am-5pm) \_\_\_\_ ½ day (9am-1pm) Session 1: June 25th  – June 29th (Monday ~ Friday)

\_\_\_\_ full day (9am-5pm) \_\_\_\_ ½ day (9am-1pm) Session 2: July 23rd – July 27th (Monday ~ Friday)

 \_\_\_\_ full day (9am-5pm) \_\_\_\_ ½ day (9am-1pm) Session 3: August 20th - August 24th (Monday ~ Friday)

**Rates:** WKA members $320/week (Full Day), $220/week (Half Day)

 Non-WKA members $400/week (Full Day) $280/week (Half Day)

 **Special Discounts:**

* 2nd child 30% off, 3rd child 60% off
* Pre-register for all 3 camps, get 10% off
* 5 year WKA program members get 10% off

**Registration Deadlines:**

Registration forms and full, non-refundable payment is due 2 weeks prior to the camp session that you are registering for. Any registrations in after that will be charged $20 late fee and will only be accepted if space is available.

 **Please read and sign below:**

I understand that my child is taking lessons in the martial art of karate-do, and recognize that there are risks involved in practicing, studying, or demonstrating the martial arts. I agree to hold harmless the Washington Karate Bellevue, Inc., their officers, agents, employees, instructors, and members and authorized guests from any liability, claims, judgments or demands for damages arising from damages or injury of any kind whatsoever to my above named child during karate classes or any other summer camp activities. I also attest that my above named child has no known medical issues that would prevent them from partaking in a martial arts class and I do agree to maintain at all times a policy of medical and accident insurance.

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