

2016 Summer Camp Sessions

Do It Yourself

FULL DAY (9:00-3:00): \$250 each session

Session's: ___ #1 (6/27-7/1) ___ #2 (7/5-7/8) ___ #3 (7/11-7/15)

 ___ #4 (7/18-7/22) ___ #5 (7/25-7/29) ___ #6 (8/1-8/5)

Academic Enrichment Camp

Morning (9:00-12:00) and Afternoon DIY (12:30pm) \$325

ONE Session Only: ___ #1 (8/22-8/26)

Student Registration, (2 pages)

Student's Name: _____

Male ___ Female ___ Age: _____ Current Grade: _____

DIY Select your session: ___ Session 1, ___ Session 2, ___ Session 3
 ___ Session 4, ___ Session 5, ___ Session 6

Total Fee: \$ _____

Academic Enrichment Select your session: ___ Session 1

Total Fee: \$ _____

List any learning challenges your child may have:

Subject(s) of focus: _____

Registration Continued

PARENT INFORMATION

Father: _____ Step-Father: _____ Guardian: _____ Mother: _____ Step-Mother: _____

Full Name: _____

Address: _____

Work #: _____ /Cell#: _____

Email: _____

Person(s) authorized to pick up the student: _____

PARENT PERMISSION IS REQUIRED FOR ALL PROGRAMS

I the undersigned parent/guardian having legal custody/legal guardianship of said minor, give permission for them to attend the Echelon' Summer Camp Programs. I hereby knowingly assume all risks and dangers inherent and incidental to the activities for which I have given permission and thereby, will not hold Echelon Academy, and staff liable for any injuries incurred during these activities. Food allergies must be submitted with this registration form. I do hereby grant permission for photos and video of my child to be used by Echelon Academy for promotional and educational purposes.

Camp is located at Echelon Academy, 900 Olney Sandy Spring Road, Sandy Spring, Md. 20860

Parent Name: _____ Date _____

Signature: _____