

**2009 SUMMER ARTS CAMP June 22-26**

<i>Do Not Mark</i>	<i>Mark most to least wanted classes: 1 through 8</i>
_____	_____ Book Writing & Illustration
_____	_____ Paper Mache
_____	_____ Mixed Media
_____	_____ Dance
_____	_____ Watercolors
_____	_____ Pottery
_____	_____ Instruments
_____	_____ Theater/Drama
_____	_____ Marine Life in Acrylics

Name: \_\_\_\_\_ Boy Girl

Physical Address:  
street: \_\_\_\_\_  
city: \_\_\_\_\_ state: \_\_\_\_\_ zip: \_\_\_\_\_

Mailing Address (If Different):  
street: \_\_\_\_\_  
city: \_\_\_\_\_ state: \_\_\_\_\_ zip: \_\_\_\_\_

E-Mail Address : \_\_\_\_\_

School Grade in Fall of 2009 \_\_\_\_\_ Birth Date \_\_\_\_\_

Siblings at Camp \_\_\_\_\_

Mother/Guardian \_\_\_\_\_ Home # \_\_\_\_\_ Work # \_\_\_\_\_  
Father/Guardian \_\_\_\_\_ Home # \_\_\_\_\_ Work # \_\_\_\_\_

In the event of an emergency, whom do we call if we cannot reach you?  
Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone #: \_\_\_\_\_

Medical or other information we need to know: (include food allergies)  
\_\_\_\_\_

Who may pick up this child at the end of each day?  
Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone #: \_\_\_\_\_

Written notice is required if your child is to leave with persons other than ones designated above.

**Amount Paid** \$ \_\_\_\_\_ .00 Method of payment : CASH CHECK # \_\_\_\_\_  
Registration Fee \$110. Make Check To Friends of the Arts, Inc.

T— SHIRT SIZE (Children's sizes: circle one please)				
Extra Small	Medium	Large	Extra Small	Extra Large
Small				

Special information:
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1.I hereby give permission for my child to participate in this program and to participate in away activities (field trips, etc.). 2.Appropriate behavior and respect for staff, property, and other children must be demonstrated by participants at all times. Failure to behave appropriately will result in dismissal from the program. 3.Your signature also gives the City of Orange Beach approval to use photos of your children in promotional brochures, news articles, or other literature published by or for the City of Orange Beach.

My signature below in indicative of the fact that I have read and understood the information contained herein and agree to comply with same. In consideration of the opportunity afforded to the undersigned to participate in any City of Orange Beach Parks and Recreation activity, the undersigned hereby knowingly, freely, and voluntarily waives any right or cause of action against the City of Orange Beach, its officers, agents, and/or employees arising out of any claim whatsoever as a result of any injuries to body, life, limb, or property arising from participation in the hereinafter described activity. The undersigned shall save harmless the City of Orange Beach from and against all judgments, order decrees, attorney's fees, costs, expenses, and liabilities arising from or out of such claim, investigation, or defense thereof which may be entered, incurred, or assessed as a result of the foregoing.

Signature \_\_\_\_\_ Parent of \_\_\_\_\_ Date \_\_\_\_\_

Bring form or send to the Orange Beach Art Center at 26389 Canal Rd, Orange Beach, AL 36561