

Summer Youth Arts Camp / Summer Youth Intensive 2022



Camper Name: _____ Age _____ Date of Birth _____

Parent / Guardian Name: _____

Address _____ City _____ Zip Code _____

Phone # _____ Email _____ (For Receipt, Camper Forms, and Camp updates)

Children must be 4 years old by April 30, 2022, and able to fully use the bathroom without help. NO Exceptions.

4-10 Years Old Tuition: Weekly	*Jul 6 – Jul 8* Tuition: 3-Day	Youth Intensive Tuition: 3-Week	*Youth Intensive 3 wk Jun 27 – Jul 15	Early /After Care
<input type="checkbox"/> \$200 Member	<input type="checkbox"/> \$120 Member	<input type="checkbox"/> \$500 Member	<input type="checkbox"/> \$430 Member	\$5 per day per child
<input type="checkbox"/> \$230 Non-Member	<input type="checkbox"/> \$138 Non-Member	<input type="checkbox"/> \$525 Non-Member	<input type="checkbox"/> \$455 Non-Member	\$25 per week per child
				*\$15 Week 5

Camp	Dates	Summer Camp	Early Care <i>(Specify days or all)</i>	After Care <i>(Specify days or all)</i>	Tuition
<input type="checkbox"/> Wk 1	Jun 6 – Jun 10	Wild Kingdom	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<input type="checkbox"/> Wk 2	Jun 13 – Jun 17	Great Art Escape	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<input type="checkbox"/> Wk 3	Jun 20 – Jun 24	Mythical Creature Feature	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<input type="checkbox"/> Wk 4	Jun 27 – Jul 1	Superheroes	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<input type="checkbox"/> Wk 5	Jul 6 – Jul 8*	Wet Wild and Wacky	<input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<input type="checkbox"/> Wk 6	Jul 11 – Jul 15	Ancient History	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<input type="checkbox"/> Wk 7	Jul 18 – Jul 22	007 Spy Week	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<input type="checkbox"/> Wk 8	Jul 25 – Jul 29	Adventurers Week	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<input type="checkbox"/> Wk 9	Aug 1 - Aug 5	Magical Mysteries	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
Intensive	Dates	Summer Youth Arts Intensive	Early Care	After Care	Tuition
<input type="checkbox"/> Wks 1-3	Jun 6 -Jun 24	Enter the Twilight Zone:	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<input type="checkbox"/> Wks 4-6	Jun 27 – Jul 15*	Much to Choose About Shakespeare	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<input type="checkbox"/> Wks 7-9	Jul 18 – Aug 5	Matilda the Musical Intensive	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
SUB TOTAL					
DISCOUNT see below <input type="checkbox"/> 15% Early Bird –OR– <input type="checkbox"/> 10% Sibling / Multi Week					
TOTAL DUE					

REGISTRATION TERMS:

- Registration is on a first-come, first-serve basis.
- Full payment is due at time of registration.
- You will receive a confirmation email from OVATION TICKETING with LINKS to CAMP GUIDELINES & FAQs and CAMPER PERMISSION FORMS which must be completed and signed by a parent/legal guardian to complete registration.

DISCOUNTS: Discounts cannot be combined

- 15% EARLY BIRD ends April 30, 2022
- 10% SIBLING Discount begins May 1, 2022
- 10% MULTIPLE WEEK Discount begins May 1, 2022

Camp Policies and FAQ can be found at www.carrollwoodcenter.org/camp-activities

===== Office Only Use Below =====

Staff Initial _____ Date _____ Check # _____ Cash _____ Order # _____
Credit Card # _____ Exp _____ Code _____ Zip Code: _____



CARROLLWOOD CULTURAL CENTER

Summer Youth Arts Camp 2022 – Camper Permission/Medical/Liability Waiver

Camper Name: _____ Age _____ Date of Birth _____

Parents/Guardians: _____ / _____

Phone: _____ Email: _____

Authorized Pick-Up List/ Emergency Contacts

List persons approved to pick up camper and in event of an emergency. Please list all who are authorized for pick-up.

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Participation/ Liability Release

I hereby waive, release, and discharge any and all claims for damages for personal injury, property damages or which may hereafter occur to me as a result of participation in Carrollwood Cultural Center summer camp events. This release is intended to discharge in advance Carrollwood Cultural Center, its officials, officers, employees, volunteers and agents from liability, even though that liability may arise out of perceived negligence on the part of persons mentioned above. It is understood that some recreational activities involve an element of risk or danger of accidents, and knowing those risks, I hereby assume those risks. It is further understood and agreed that this waiver, release, and assumption of risk is to be binding on my heirs and assignees. I give consent for (child name) _____ to participate in the above activities, and I execute the above liability release on their behalf.

Parent Signature _____ Date _____

Consent for Treatment/Medical

I hereby give my consent to have the above applicant treated by emergency medical personnel, a physician, or surgeon, in case of sudden illness or injury while participating in the above activity. It is understood that Carrollwood Cultural Center will provide no medical insurance for such treatment and that the cost thereof will be at my expense.

I have read and understood the foregoing registration liability release and parental consent form, and agree to all of its terms and conditions. The Carrollwood Cultural Center is not responsible for costs incurred for medical care.

Physician's Name _____ Hospital Affiliation _____

Address _____ Telephone Number _____

Medical Insurance Provider _____ Policy and/or Group # _____

Does camper need to take medication(s) during camp? Please Check One: No Yes

Allergies: _____

Medication, please specify: _____

Medications must be accompanied with clearly written directions and labeled with camper name.

I authorize that prescribed medication be administered to my camper as needed by a representative(s) of the Carrollwood Cultural Center.

Parent Signature _____ Date _____



2022 Carrollwood Cultural Center Summer Camp Participation Agreement

Parents, please review this form with your child prior to attending camp and sign or initial.

In preparing students for our arts camp, we are communicating with camp families the expectations and rules for behavior while participating in Carrollwood Cultural Center's summer activities and Show & Shares.

Please review and discuss the *Camper Participation Agreement* with your child and return it with your child's application for enrollment to complete registration.

1. I will be considerate and respectful to everyone. I will keep my hands, feet, and body to myself at all times.
2. I will be respectful of the space and items that do not belong to me.
3. I will find an instructor or counselor and use my words if I need help.
4. I will listen to the instructors and counselors.
5. I will participate and do my very best. I understand that dedication, focus, and participation are what make camp successful for all.

I understand that if I do not follow these rules I could be dismissed from camp for the day. If I continue to break these rules consistently I could be dismissed from camp for the summer. I understand these rules are in place for my safety and fun at camp and the fun and safety of everyone at camp.

CAMPER NAME (Please Print) _____

Camper Signature (or initials) _____ Date _____

Parent Signature _____ Date _____



CARROLLWOOD CULTURAL CENTER
2022 Carrollwood Cultural Center

Summer Youth Arts Intensive Participation Agreement

Students, please review this form prior to attending the intensive and sign. This form must be signed by the student before attending.

By signing this agreement I, (please print name here) _____, hereby agree to abide by the rules set in place by the Carrollwood Cultural Center.

I will participate to the best of my abilities. I understand that dedication, focus, and participation are the expectation.

I understand I am part of the ensemble. As part of the ensemble I will show up and give 100%. I will respect myself, my peers, the staff and the instructors at all times.

- **Cell Phones are prohibited.** A parent may arrange for their student to have a cell phone during the intensive with the Education Director prior to the beginning of a session.
- **Dress:** Dress appropriately to move. Activities will include high intensity movement including running and dancing. Closed toed shoes only. Please wear appropriate clothing.
- **Language:** Foul or inappropriate language will not be tolerated.
- **Belongings:** The Carrollwood Cultural Center is not responsible for lost or stolen items. Please leave all valuables at home.

I understand that this contract is in place for my safety and the safety of others. If I do not abide by the rules I WILL be dismissed from the intensive for the day and continuous disrespectful behavior will result in dismissal from the intensive for the remainder of the summer.

Student Signature _____ Date _____



CARROLLWOOD CULTURAL CENTER

**Summer Youth Arts Camp/ Summer Youth Arts Intensive 2022
Carrollwood Cultural Center Policies**

Please read and sign below for all forms to be completed.

Registration Terms & Conditions: I have read and I understand the policies regarding transfers, refunds, and cancellations. I agree to them as stated in the 2022 Camp Brochure and on carrollwoodcenter.org website

Behavior /Conduct: I understand that if my child’s behavior is disruptive, aggressive, or harmful towards other campers after 3 corrective warnings by faculty or staff, he/she will be dismissed from camp for the day, if the behaviors continue, my child may be dismissed from camp without a refund.

Photographs/Video: I understand that photographs and video of my child will be taken during the Friday performance. Pictures may be used by the Carrollwood Cultural Center in program brochures, annual report, website, and other promotional materials and for release to local newspapers.

Disclosure: If my child has any special needs (language, learning disability, speech, hearing, food allergies, etc) I agree to contact the Education Director (813-922-8167 ext 205) prior to the first day of participation.

Lost or Stolen Items: Campers should leave valuables, electronics (mp3 players, digital cameras, cell phones, toys, Pokemon Cards, etc.) at home. The Carrollwood Cultural Center and its employees are not responsible for lost or stolen items.

Cell Phones: We encourage campers to leave cell phones and other electronic devices at home. If brought to camp, please understand, the phone must be checked in with an instructor at the beginning of the camp day and will be allowed at designated times. By bringing a cell phone to camp, the camper assumes all responsibility should the phone be damaged or lost.

Backpack Search: For the safety of all campers, I agree that camp participant’s belongings may be searched outside the participant’s presence for medications, weapons or other restricted items and held in the office until turned over to a legal guardian.

Sunscreen: I give permission for sunscreen to be administered and/or applied to my camper as deemed necessary by the camp staff.

By signing below you acknowledge and agree to the above camp policies, terms and conditions and give permission for your child to attend and participate in all camp activities.

Camper/Student Name _____

Parent/Guardian Print Name: _____

Parent Guardian Signature: _____ Date: _____



CARROLLWOOD CULTURAL CENTER

Confirm camp/intensive registration by returning forms to:

Katie Castonguay, Education Director
Carrollwood Cultural Center

Scan and send via email: Katie@carrollwoodcenter.org

Mail To: 4537 Lowell Road, Tampa, FL 33618

Drop off at Carrollwood Cultural Center, Front Office