

Olympia Waldorf School

2010 Summer Camp Registration Form

Name of Student(s): _____

Parent's Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Phone, with area code: _____

School: Olympia Waldorf School
 Other School: _____

Grade(s) as of September 1, 2010: _____

Registration Options

- The Four Elements, all sessions for one rate
 ___ Short Days (8:30 a.m. - 1:30 p.m.) \$1,050 per summer
 ___ Long Days (7:15 a.m. - 5:30 p.m.) \$1,700 per summer
- Monthly Registration Rate according to selections below

June 14 __ Short day __ Long day	15 __ Short day __ Long day	16 __ Short day __ Long day	17 __ Short day __ Long day	18 __ Short day __ Long day
21 __ Short day __ Long day	22 __ Short day __ Long day	23 __ Short day __ Long day	24 __ Short day __ Long day	25 __ Short day __ Long day
28 __ Short day __ Long day	29 __ Short day __ Long day	30 __ Short day __ Long day	July 1 __ Short day __ Long day	July 2 __ Short day __ Long day

June Billing: _____ short day(s) x \$ 25 = \$ _____
 _____ long day(s) x \$ 37 = \$ _____

Experience the Four Elements this Summer at Olympia Waldorf School

Fire: Calling in the Sun

Celebrating the solstice and diving into drama

June 14 — July 2

Air: Singing and Soaring

Music and kite making

July 5 — 23

Water: Slipping and Sliding

Playing and working with water

July 26 — August 13

Earth: In the Garden and Art

Harvesting the summer bounty and creating with clay

August 16 — 27

Early Morning Care

7:15 a.m. — 9:00 a.m.

Camp Crafts and Activities

9:00 a.m. — 1:00 p.m.

Afternoon Care

1:00 p.m. — 5:30 p.m.

July 5 __ Short day __ Long day	6 __ Short day __ Long day	7 __ Short day __ Long day	8 __ Short day __ Long day	9 __ Short day __ Long day
12 __ Short day __ Long day	13 __ Short day __ Long day	14 __ Short day __ Long day	15 __ Short day __ Long day	16 __ Short day __ Long day
19 __ Short day __ Long day	20 __ Short day __ Long day	21 __ Short day __ Long day	22 __ Short day __ Long day	23 __ Short day __ Long day
26 __ Short day __ Long day	27 __ Short day __ Long day	28 __ Short day __ Long day	29 __ Short day __ Long day	30 __ Short day __ Long day

July Billing: _____ short day(s) x \$ 25 = \$ _____
 _____ long day(s) x \$ 37 = \$ _____

August 2 __ Short day __ Long day	3 __ Short day __ Long day	4 __ Short day __ Long day	5 __ Short day __ Long day	6 __ Short day __ Long day
9 __ Short day __ Long day	10 __ Short day __ Long day	11 __ Short day __ Long day	12 __ Short day __ Long day	13 __ Short day __ Long day
16 __ Short day __ Long day	17 __ Short day __ Long day	18 __ Short day __ Long day	19 __ Short day __ Long day	20 __ Short day __ Long day
23 __ Short day __ Long day	24 __ Short day __ Long day	25 __ Short day __ Long day	26 __ Short day __ Long day	27 __ Short day __ Long day

August Billing: _____ short day(s) x \$ 25 = \$ _____
 _____ long day(s) x \$ 37 = \$ _____

**payment options and student release authorizations on reverse*

Olympia Waldorf School 360-493-0906
 PO Box 130 summer@olympiawaldorf.org
 East Olympia WA 98501 www.OlympiaWaldorf.org

OWS 2010 Summer Program Registration continued

Billing Total

Family Name _____

Camp registration fee: \$ 50 _____

Total of registration options from other side: _____

Returning Camper or OWS student discount (\$50): _____

Total Amount Due: _____

Payment Options (the non-refundable registration fee is due upon registration)

Check Enclosed for \$50 registration fee Total Amount Due

Charge my credit card

Credit Card Number _____ Expires _____ VISA MC

Name on Card _____ Three digit security code _ _ _

I hereby authorize the Olympia Waldorf School to initiate charges to my credit card listed above for the following one-time or recurring transactions: \$50 registration fee Total Amount Due

Signature _____ Date _____

Registration Terms and Conditions: Balance due will be invoiced in three installments according to your registration options and will be due on or before the first Monday of camp for the month. There are no refunds for unused days. Cancellation/Early Withdrawal: Ten days written notice required for cancellation with full refund minus registration fee. There are no refunds for early withdrawal or for cancellation with less than ten days written notice. Registrations are processed on a first come, first served basis. All programming subject to meet minimum enrollment requirements. In cases of OWS-sponsored cancellation, a full refund will be issued.

Emergency Medical Information and Consent for Treatment: A current emergency medical form is required for each camper. If you do not have a current form on file at OWS, one will be mailed with your registration confirmation.

Student Pick-up Authorization:

Please list the names of people who are authorized to pick up your child(ren) from camp: _____

Specific carpool arrangements: _____

Please list the names of people who may NOT pick up your child(ren): _____

*To ensure the safety of your child OWS staff will ask for picture ID from any adult they do not recognize at pick-up.

Photography Release: I give Olympia Waldorf School absolute rights and permission to publish and or copyright photographs of myself and/or my child. These photographs may be used for marketing and publicity purposes, in any medium, without compensation to myself and/or my child. I hereby waive any right to inspect or approve the finished product, including written copy that may be created with said photographs.

Parent Signature _____ Date _____

Limit of Liability: I hereby voluntarily and knowingly assume all risks and dangers inherent and incidental to the activities of the summer program at Olympia Waldorf School. I will hold Olympia Waldorf School, its Board of Trustees and employees free and harmless from any and all claims, costs, losses, damages, recoveries, settlements and expenses of any nature or kind which may be incurred by participation in activities at Olympia Waldorf School whether caused by equipment or the acts of omission of others excepting damage or injury solely caused by the willful misconduct or negligence of Olympia Waldorf School or its employees or agents.

Parent Signature _____ Date _____