Martial Art Leadership 2010 at Baker Demonstration School

The following information is required for registration for each camper:

Camper's Name: _____ Gender: _____
Last First

Birth Date: ____/____/_____ Grade: _____
MM DD YYYY (As of September 2010)

Parent/Guardian: _____
Last First

Address: _____
Street City State Zip

Phones: _____
Home Cell Business

Parent's email: _____

Please select your session:

□ Full Session	(8 weeks)	June 14-Aug 6	(no camp July 5)
□ Session I	(4 weeks)	June 14-July 9	(no camp July 5)
□ Session II	(6 weeks)	June 14-July 23	(no camp July 5)
□ Session III	(4 weeks)	July 12-Aug 6	

	4 weeks	6 weeks	8 weeks
Grade 2-Grade 6*			
Full-Days (5 days, 8:30 am-3:00 pm)	□ $1500	□ $1950	□ $2200
Grade 2-Grade 8*			
Mornings (5 days, 8:30 am – Noon)	□ $1100	□ $1350	□ $1400

Enrollment grade based on Fall 2010 grade level

Extended Care

A.M. (7:30-9:00)	$50 per week	____ (#) of weeks X $50	$_____
P.M. (3:00-5:30)	$75 per week	____ (#) of weeks X $75	$_____
Drop-in	$10 per hour	(pay as you go)	

Fees Summary

Camp Fee	$_____
Extended Care – A.M.	$_____
Extended Care – P.M.	$_____
Total Camper Fees	$_____