



2014 Summer Camp Registration Form

Child's Name: _____

Parent's Name: _____

Address: _____

City: _____ Zip Code: _____

Home Phone: _____ Work/Cell: _____

Email Address: _____

Child's Birth Date: _____

Camp Choice: _____ Date: _____

Week Camp - or - Day Camp (circle one)

Food Allergies or Medical Concerns: _____

Emergency Contact: _____

Phone: _____ Alt. Phone: _____

I have registered _____ for a summer camp program at Mudhouse Pottery Painting. I agree to hold harmless and release Mudhouse Pottery Painting and its affiliates, members, employees, attorneys, representatives, successors and assigns (collectively, the "Releasees"), of or from, and promise never to institute, assert, prosecute or pursue, any and all claims, charges, liabilities, claims for relief, demands, suits, action or causes of action against the Releasees, whether based in contract or relating to personal injury or damage to property, arising during the course or as a result of this camp.

Parent Signature: _____ Date: _____

Tuition is payable in full and is due upon registration. Payment Method: _____

Credit Card# _____ Exp: _____ Sec. Code: _____

