

Capitol Hill Arts Workshop
JR. ARTS ADVENTURE 2010 – Registration
 Ages 4 & 5 (Pre-K)

Student Name _____ ***Birthdate** _____ **Age** _____

*Without exception, students must turn 4 by June 1, 2010

Parent/ Guardian 1 name _____ **Relationship** _____

Street Address _____

City/State _____ Zip Code _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

Parent/ Guardian 2 name _____ **Relationship** _____

Cell Phone _____ Work Phone _____

Email: _____

Camp Selection (please check all that apply)

Please note: there's a 10% discount for a family's second child enrolled in camp; fill out a separate form for each child.

Camp Sessions	Monday - Friday 2:00 pm – 5:00pm	TOTAL
Session I 7/05-7/09	Madagascar <input type="checkbox"/> \$185	\$
Session II 7/12-7/16	Spain <input type="checkbox"/> \$185	\$
Session III 7/19-7/23	Australia <input type="checkbox"/> \$185	\$
GRAND TOTAL		\$

Questions 1-4 are optional and are used by CHAW specifically for grant writing purposes.

1. Student's Gender:	2. Student's Race/Ethnicity
3. How did you hear about CHAW?	4. Have you or anyone in your family taken classes at CHAW before?

Form Continues on Reverse Side

Payment

Subtotal this registration	\$
Subtotal additional Family registrations	\$
\$10 registration fee (if classes have never been taken at CHAW)	\$
Discount (see box below for terms)	\$
Total Balance Due:	\$

Monthly payment plans are available. Payment plan payments are made on the 1st or 15th of each month and may be split into as many as 5 payments. **The payment plan option requires a down payment at the time of registration. Additionally, payment plans *must* be set up with either postdated checks or a valid credit card – please do not submit a registration without one or the other.** Call the office at 202-547-6839 with any questions.

Check(s) payable to CHAW (enclosed) **OR** Visa MasterCard American Express

Card Number: _____ Expiration: ____/____/____

Signature: _____

Down Payment: _____ Number of Payments: _____ Payment Date: 1st 15th

Terms of Discount

CHAW offers a 10% discount on subsequent registrations within the same family.

1. Discount is taken from lowest priced registration ie: higher priced registration pays full price, registrations of equal or lesser value pay discounted price.
2. Separate forms must be filled out for each additional student.

Camp Cancellation Policy

	Final Full Refund Date	75% Tuition Credit	No Refund/Credit
Session I	05/31/2010	06/07/2010	06/14/2010
Session II	06/14/2010	06/21/2010	06/28/2010
Session III	06/28/2010	07/05/2010	07/12/2010

All cancellations must be made in writing. Cancellations may be submitted to registration@chaw.org, in person, or via fax: 202.543.1723

Late Registration & Prorating of Fees

Summer camp prorating of fees is allowed after the first day of camp as space is available and with instructor and camp director approval. **In these instances refunds are not available.**

NEW POLICIES FOR 2010

- Limited financial aid is available based on household and responsible party income. **Financial aid forms and information should be submitted along with this registration form.** Applicants with completed forms will be reviewed and notified in a timely manner. Please visit www.chaw.org to download the financial aid form or call (202) 547-6839 for more information.
- Medical and behavior forms must be returned to the office along with this registration form.

I have included completed medical and behavioral forms (REGISTRATIONS WILL NOT BE PROCESSED WITHOUT THESE DOCUMENTS).

I have read the camp information sheet that accompanies this form and understand the Capitol Hill Arts Workshop's camp policies and procedures.

Signature: _____ Date: _____