

Princess & Super Hero Summer Party Camps Ages 3-6



*Super Heroes & Royalty alike
will soar through the air and
leap castle walls!*

Ages 3 - 4

July 17, 18, 19 (9:00-11:00a)
3 Day Camp - \$89.00
Register and pay by 4/30/18 - only \$82.00

Boom!



Ages 4 - 6

July 23-27 (9:00-Noon)
5 Day Camp - \$189.00

Register and pay by 4/30/18 - only \$179.00

*Party every day! Dance activities, games,
obstacle courses, snacks and crafts,
Dress-up Day. Meet new friends!*



Call (610) 494-4610 for Details!

Paul Klocke Studio of Dance, 300 Turner Industrial Way, Aston PA 19014
Email: studio@paulklockdance.com Website: www.paulklockedance.com

Princess & Super Hero Camps

- Child's Name: _____
- Age: _____ Birthdate: _____
- Health Concerns: _____
- Allergies: _____
- Guardian's Name: _____
- Address: _____
- City/State/Zip: _____
- Phone: _____
- Email: _____

Photo Release : I accept that the studio often takes pictures and videos of the students in class and in performance and that these pictures may be used in studio displays and social media promotional materials.

Medical Release : I the Parent/Guardian of the student registrant agree that the registrant and I consent to the registrant's participation in the PKSD physical programs and activities ("PROGRAMS"). Recognizing the possibility of physical injury associated with the PROGRAMS, and in consideration for the PKSD accepting the registrant for its PROGRAMS, I hereby release, discharge, indemnify, and hold harmless the PKSD, its affiliated organizations, and their employees, teachers, and associated personnel from and against any and all claims by or on behalf of the registrant as a result of the registrant's participation in the PROGRAMS. In my absence, I also request PKSD, through its staff, to obtain emergency medical care in the event that such care is necessary or appropriate in the opinion of the staff for the benefit of my child due to accident or illness. I promise to pay any treatment costs directly to the hospital, physician, or laboratory providing such care upon presentation of the bill to me.

Parent Signature _____ **Date** _____

____ 3-5 yr old Camp; July 17, 18, 19 (3-day camp)

____ 4-6 yr old Camp; July 23 - 27 5-day camp)

Amount Included _____

*To Register, fill out this form and call the studio
to pay by credit card over the phone.*

Cancellation/Refund Policy: If notified 28 days before first day of camp - 80% refund given; if notified 14 days before first day of camp - 50% refund given; 0-13 days before first day of camp - no refunds can be given.