

STARZ DANCE GALAXY SUMMER CAMPZ!

LOCATED AT: 109 State Road 436, Fern Park, FL 32730 ** 407-332-7827

FOR ONLY \$120 A WEEK, BRING YOUR CHILD TO A STARZ DANCE GALAXY CAMP! (INCLUDES FIELD TRIPZ & SNACKS EACH DAY...LET US ENTERTAIN YOUR CHILD OVER THE SUMMER in a *FUN & SAFE* environment!)

HOURS: 8am-6pm for Ages 3-14 (must be potty-trained)

Week 1: June 6 – June 10 _____
Week 2: June 13 – June 17 _____
Week 3: **CLOSED the week of June 20**
Week 4: June 27 – July 1 _____
Week 5: July 4 – July 8 _____
Week 6: July 11 – July 15 _____
Week 7: **MUSICAL THEATRE week** (see separate form)
Week 8: July 25 – July 29 _____
Week 9: Aug 1 – Aug 5 _____
Week 10: Aug 8 – Aug 12 _____

STARZ Dance Galaxy Campz are Monday-Friday from 8am-6pm at the GREAT LOW PRICE of \$30.00 a day **OR** for all 5 days \$120 (that's a *\$30 savings*) for all 50 hours! Only \$105 for siblings (within in the SAME family). **What a DEAL!**

EVERY WEEK IS FILLED WITH FUN & EXCITING FIELD TRIPZ EVERY DAY! THE EXACT SCHEDULE WILL BE RELEASED ON THAT MONDAY FOR THAT WEEK'S ACTIVITIES!

NOTE: STUDENTS must bring a BAGGED LUNCH, Snacks & Drinks! PLEASE wear comfortable clothes that are easy to move in. PLEASE wear SNEAKERS & SOCKS every day! (needed for field tripz!).

Student Name: _____ Parent Name: _____
Address: _____ City/State/Zip: _____
DOB: _____ AGE: _____ Grade/School: _____
Tele: (home) _____ (cell) _____ (work) _____
Emergency Contact: _____ Emergency Number: _____

EMAIL ADDRESS: _____

ANY KNOWN ALLERGIES: _____

LIABILITY WAIVER: STARZ DANCE GALAXY provides classes & training at the exclusive risk of the participants. Your signature below indicates your (parent/guardian) complete understanding & acceptance of this liability waiver & your consent for any emergency medical treatment. STARZ DANCE GALAXY does not carry any medical insurance for its students or guests. All fees are non-refundable. We reserve the right to cancel any class/camp that does not meet our minimum requirements (in this case, fees would be refunded). By signing below, you are also giving permission for Starz Dance Galaxy to transport your child.

Signature: _____ Date: _____

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For OFFICE USE ONLY:

Amount Paid: _____ CC/ CASH: _____

DATE: _____ INITIALS: _____

WEEKS: 1) _____ 2) _____ 3) **CLOSED** 4) _____ 5) _____ 6) _____
7) **Musical Theatre Week** 8) _____ 9) _____ 10) _____