

KIDS Interession ARTS CAMPS & AFTERNOON ADVENTURES

Winter/Spring Interession Camps

These camps are designed for students ages 5 to 12 years and offer flexible daily or weekly schedule to accommodate year-round and traditional school breaks. Camp runs from 9:00 AM to 2:00 PM. Drop-off begins at 8:00 AM. For full day programs, add the Afternoon Adventures program, which runs from 2:00 – 5:30 PM. Students ages 14 and older are eligible to volunteer. Call (919) 560-2726 for more information. DAC provides a fresh fruit snack. If you camper has food allergies to fruit, please pack a snack. Please pack your campers a brown bag lunch (no refrigerator or microwave available).

Winter Interession Day Camp December 19 – 23 • January 3 – 6

(9:00 AM – 2:00 PM, drop-off begins at 8:00 AM)

Art and Astronomy

Explore the universe through the vast and diverse art work inspired from astronomy. You will learn about the work of the ancient Mayan Civilization and the paintings of Vincent Van Gogh as they try to capture and understand the universe.

Cost per Session

Weekly Price \$130 (\$120 per additional sibling per household) *Weekly Price for December Session Only
Daily Price: \$30

Spring Interession Day Camp March 26 – April 13

(9:00 AM – 2:00 PM, drop-off begins at 8:00 AM)

The Sixties

The Sixties were a time of cultural change. We began to hear the sounds of Motown in music and the Beatles became popular during what is now known as the British Invasion. Artists such as Andy Warhol, Stan Lee and Roy Lichtenstein became famous. Step back into the past as you learn about this exciting decade.

Cost per Session

Weekly Price \$130 (\$120 per additional sibling per household)
Daily Price: \$30

Need a full day? Add Afternoon Adventures

(2:00 PM – 5:30 PM, Ages 6-12)

Explore the culture of Durham! The Afternoon Adventures program will take you to various destinations throughout Durham including museums, theaters and more! Afternoon Adventures also invite performers to the Durham Arts Council to teach you about life as an artist. Then, create projects inspired by the artists you meet and artwork you see.

Cost per Session

Weekly Price: \$90 (\$85 per additional sibling per household)
Daily Price: \$20



CHILD 1

PLEASE TYPE OR PRINT

Student's Name _____ Date of Birth _____

Address _____ City _____ Zip _____

Medical Conditions/Special Needs _____

Who will pick up your child from camp? _____

List all allergies, medications _____

**including behavior modifications that your child is taking*

If DAC will administer any medications you must provide the medication along with a signed letter detailing your instructions.

*** Let us know if there are any changes to your child's medication through out the camp!**

CHILD 2

Student's Name _____ Date of Birth _____

Address _____ City _____ Zip _____

Medical Conditions/Special Needs _____

Who will pick up your child from camp? _____

List all allergies, medications _____

**including behavior modifications that your child is taking*

If DAC will administer any medications you must provide the medication along with a signed letter detailing your instructions.

*** Let us know if there are any changes to your child's medication through out the camp!**

PICK UP

Who will pick up your child from camp? **(Circle all that apply)** Mom/Guardian, Dad/Guardian

Pick up other than Parents/Guardian:

Name _____ Phone (H) _____ (C) _____

Name _____ Phone (H) _____ (C) _____

Name _____ Phone (H) _____ (C) _____

EMERGENCY

For immediate questions/emergencies: **(Circle all that apply)** Mom/Guardian, Dad/Guardian, Other

If other please provide the following:

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Doctor's Name _____ Phone _____

Health Insurance Carrier _____ Policy# _____

Any other necessary information: _____

PARENT INFO

Mother/Guardian's _____

Phone (H) _____ (W) _____ (C) _____

Father's/Guardian's _____

Phone (H) _____ (W) _____ (C) _____

Email (Mom) _____ (Father) _____

Any other additional information: _____

INTERSESSION CAMP REGISTRATION

CLIP OR COPY THIS

List Camper(s) name(s)	Age	WINTER DECEMBER 19-23 (CIRCLE)	SPRING WEEK 1 MARCH 26-30 (CIRCLE)	SPRING WEEK 2 APRIL 2-6 (CIRCLE)	SPRING WEEK 3 APRIL 9-13 (CIRCLE)	Afternoon Adventures (CIRCLE)	PRICE
		FULL WEEK	FULL WEEK	FULL WEEK	FULL WEEK	FULL WEEK WINTER 1 SPRING 1 2 3	
		FULL WEEK	FULL WEEK	FULL WEEK	FULL WEEK	FULL WEEK WINTER 1 SPRING 1 2 3	
		FULL WEEK	FULL WEEK	FULL WEEK	FULL WEEK	FULL WEEK WINTER 1 SPRING 1 2 3	
TOTAL							

List Camper(s) name(s)	Age	WINTER DEC (CIRCLE)	WINTER JAN (CIRCLE)	SPRING WEEK 1 (CIRCLE)	SPRING WEEK 2 (CIRCLE)	SPRING WEEK 3 (CIRCLE)	Afternoon Adventures (CIRCLE)	PRICE
		DAYS: 1 2 3 4 5	DAYS: 1 2 3 4	DAYS: 1 2 3 4 5	DAYS: 1 2 3 4 5	DAYS: 1 2 3 4 5	DAYS: 1 2 3 4 5	
		DAYS: 1 2 3 4 5	DAYS: 1 2 3 4	DAYS: 1 2 3 4 5	DAYS: 1 2 3 4 5	DAYS: 1 2 3 4 5	DAYS: 1 2 3 4 5	
		DAYS: 1 2 3 4 5	DAYS: 1 2 3 4	DAYS: 1 2 3 4 5	DAYS: 1 2 3 4 5	DAYS: 1 2 3 4 5	DAYS: 1 2 3 4 5	
TOTAL								

PAYMENT INFORMATION

CHECKS: Please make checks payable to Durham Arts Council Inc. **\$30 fee will be charged for all returned checks and registration will be removed**

CREDIT: Visa MasterCard

CARD NUMBER: _____ - _____ - _____ - _____ EXPIRATION DATE: _____

PRINTED NAME ON CARD _____ CARDHOLDER SIGNATURE _____

INSTALLMENTS: *You must fill this out:* I will pay my fee(s) in two equal installments of \$ _____ each. The first payment is due upon registration & the second is due *two weeks* before my child's first session. I understand that I am obligated to pay the course fee regardless of my child's attendance & that refunds are subject to the terms outlined in the Summer Arts Policy. *(A credit card must be used for multiple payments. We will automatically charge your second payment two weeks before the first session).*

SUMMER AND INTERSESSION ARTS CAMP REFUND POLICY: Parents who need to withdraw their child/children from any Summer or Intersession Arts Camp, for any reason, prior to the start date should contact DAC Education Office in writing at least *2 weeks before* session begins. You will receive a refund, less \$30 service charge per two-week camp per session and \$10 per mini-camp session. These are the only circumstances in which DAC gives cash refunds. DAC will transfer your child to a later session only if space is available. Parents who need to withdraw their child/children from any Summer or Intersession Arts Camp, for any reason, after the start date should contact DAC Education Office in writing. You will not receive a cash refund. You may transfer your remaining balance to another camp or course in the same term for any family member. DAC will transfer your child to a later session only if space is available. Mail-in Registrations will be recorded by date of receipt. You may mail-in, drop-off or fax (919)560.2725 registrations. For more information please call (919)560.2726.

WAIVER OF LIABILITY: In consideration for Durham Arts Council, Inc. making its programs available to me and/or my child, I hereby release Durham Arts Council, Inc. its employees, volunteers and agents from any and all liability, cost or expense associated with any injury I and/or my child may sustain while participating in any Durham Arts Council programs. In the event of an emergency, I give my permission to Durham Arts Council, Inc. to call for Emergency Medical Services (911) and/or to select a physician to secure proper treatment for my child. Durham Arts Council, Inc. occasionally takes photographs of classes for use in DAC publicity. Therefore, I grant Durham Arts Council, Inc. permission to photograph and/or record me or my child's likeness and voice using video, audio, photographic, digital, electronic or any other medium (collectively referred to as 'the recordings') as part of my participation in classes or camps. I acknowledge that all rights, title and interest to the recordings will belong to Durham Arts Council, Inc. Durham Arts Council, Inc. may also use, reproduce, exhibit or distribute in any medium (e.g. print publications, video tapes, CD-ROM, online, podcasts, transcripts) these recordings for any purpose that Durham Arts Council, Inc., and those acting pursuant to its authority, deem appropriate, including promotional or advertising efforts. Participant names will not be listed.

Signature of Parent or Legal Guardian _____ **Date** _____