

MUC Children's Academy 2019 Summer Program Registration Form

Please complete the registration form and make a check payable to MUC. You can send it to MUC Children's Academy 1830 W. Square Lake Rd Bloomfield Hills MI, 48302. To make a payment over the phone please call, 248-858-9095.

You may register **all** children age (2.5-12) attending the camp on this form. Children under 2 years old will have different registration form. Please check with MUCCA office.

Child's Full Name:	Age:	DOB:	Allergies:
Child (1) _____	_____	_____	_____
Child (2) _____	_____	_____	_____
Child (3) _____	_____	_____	_____

Mother's Full Name _____ **Mother's Phone#** _____

Father's Full Name _____ **Father Phone#** _____

Home Address _____ City _____
State _____ Zip Code _____

Emergency Contact Name _____ **Relationship to child** _____

Contact Phone _____ **Other Phone** _____

Indicate the weeks your child/ren will be attending,

Week (1) _____ June 17 - June 21	Week (5) _____ July 15 - July 19	Week (9) _____ August 12 - August 16
Week (2) _____ June 24 - July 28	Week (6) _____ July 22 - July 26	Week (10) _____ August 19 - August 23
Week (3) _____ July 1 - July 3	Week (7) _____ July 29 - August 2	Week (11) _____ August 26 - August 30
Week (4) _____ July 8 - July 12	Week (8) _____ August 5 - August 8	

Camp Acknowledgement

- The total program fee (\$250 child/ week), (\$475 child/2 weeks), (\$700 child/ 3 weeks), or (\$900 child/ 4 weeks) must be paid in full by the beginning of each week to secure a space for your child/ren. No Refunds.
- 10% sibling discount per week. \$15 field trip Not included in the summer tuition. \$10 per hour for extended care.
- I hereby release the MUCCA Summer Program and its teachers and agents from any and all liability, claims, and/or damages. I hereby waive any and all claims and actions on behalf of myself, my heirs, assigns or successors in interest with respect to the MUCCA Summer Program and my child/ren's participation in the same.
- I hereby give MUCCA Summer Program permission to photograph or videotape my child/ren while in attendance at the program for the production of program materials/media for informational and other appropriate areas.
- MUCCA has the right to suspend or dismiss any child for violation of program policies and/or directives as deemed necessary by program Administration.
- I hereby give permission for my child/ren to be transported in a vehicle or school bus for scheduled offsite field trips.
- MUCCA reserves the right to make changes in the program as necessary.

The undersigned hereby acknowledges that they have read and understood the above information.

Signature: _____ **Print Name:** _____ **Date:** _____