

Alexander's Martial Arts  
Karate Day Camp Reservation Form

1 <sup>st</sup> Child's Name:	Age:
2 <sup>nd</sup> Child's Name:	Age:
3 <sup>rd</sup> Child's Name:	Age:
Parent's Name:	
Phone Number:	Email:

These are the daily camps offered for the 2018-2019 School Year.

**Daily Rate (circle AMA or Non-AMA)**

**\$45 per child per day**

Registration is on a first come, first sign-up basis.

DATE	1 <sup>st</sup> Child	2 <sup>nd</sup> Child	3 <sup>rd</sup> Child	Total
Monday 11/19/2018	\$ _____	\$ _____	\$ _____	\$ _____
Tuesday 11/20/2018	\$ _____	\$ _____	\$ _____	\$ _____
Wednesday 1/2/2019	\$ _____	\$ _____	\$ _____	\$ _____
Thursday 1/3/2019	\$ _____	\$ _____	\$ _____	\$ _____
Friday 1/4/2019	\$ _____	\$ _____	\$ _____	\$ _____
Monday 1/21/2019	\$ _____	\$ _____	\$ _____	\$ _____
Monday 2/18/2019	\$ _____	\$ _____	\$ _____	\$ _____

The following paperwork must be completed before first day of selected AMA camps:

1. **Camp Reservation Form** must be returned to AMA as soon as possible for reservation purposes.
2. **Karate Camp Registration Packet** must be submitted to AMA no later than one (1) week prior to your first day of camp. This ensures that AMA has the information necessary to properly care for your child(ren).

**Payment Options:**

1. CREDIT CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_\_
2. **MAKE CHECKS PAYABLE TO: ALEXANDER'S MARTIAL ARTS**

- I hereby request that you RESERVE a space for my child(ren) at the Alexander's Karate Camp for the dates specified above.. I agree to be bound by the rules outlined in the Karate Camp Guidelines.
- I hereby grant permission for Alexander's Martial Arts/MYB to use pictures of my child in promotional/advertising flyers and other media.
- **Cancellation/Refunds:** No refunds will be issued unless you cancel in writing **14 days** before the start of the selected Day Camp indicated above. \_\_\_\_\_ Initial

Parent Signature: _____	Date: _____
-------------------------	-------------