

Proletics Martial Arts & Fitness Summer Camp Program 2023

REGISTRATION FORM

PARTICIPANT INFORMATION

Please type or print legibly.

Last Name: _____ First Name: _____

Gender: Female Male Age: _____ DOB: _____

T-Shirt Size _____ Purchase extra t-shirts @ \$17.0 Quantity/size _____

Home address: _____

City: _____ State/Province: _____ Postal/Zip Code: _____

Country: _____ Telephone: _____ cell: _____
(Include area code with telephone)

Parent email: _____

Mother's name: _____ Father's name: _____

Mother's day phone: _____ Father's day phone: _____

Mother's cell: _____ Father's cell: _____

Person/s Authorized to pick up child: _____
(Please provide a copy of their ID)

Other Dismissal Arrangements _____

Emergency contact*: _____ Relationship: _____ Phone: _____

Specify any of your child's health problems: _____

Is your child on any medication? No Yes If so, please specify: _____

Payments: Tuition may be paid by debit or credit card

Make the check payable to: **Proletics**

Weekly Fees: \$180/weekly includes field trips and activities (must sign up for auto debit)
\$50 daily rate plus field trips, 3 days or more will be charged at the weekly rate.
2nd family member - \$5.00 discount on weekly rate only

Registration fee:

Sign up by April 1st - \$65 includes camp t-shirt

Sign up by April 30th - \$75 includes camp t-shirt

Sign up by May 15th - \$85 includes camp t shirt

Sign up after May 16th - \$95 includes camp t shirt

Current Afterschool Students \$50

Current Afterschool Students \$60

Contact Information

For more information, Proletics at
813-563-9348
Emails: proletics@gmail.com

Circle the weeks your child/children will attend Summer Camp.

05/30 06/05 06/12 06/19 06/26 07/03 07/10 07/17

07/24 07/31 (last day of Summer Camp will be Friday 08/04)

I understand that registration and the first weeks tuition is due when signing up. We do not provide make-ups or refunds for any days missed for any reason. Please do your best to come to Proletics summer camp every day. The weeks you sign up for will be the weeks you are charged.

SIGNATURE OF PARENT OR GUARDIAN _____ DATE _____

DROP OFF AND PICK UP TIMES

Drop off:

- Proletics Summer Camp will open Monday – Friday 7:00am-6:00pm
- **Monday, July 3^d and Tuesday, July 4th Proletics will be closed in observance of Independence Day**

Pick up:

- Your child must be picked up each day by 6:00 pm
- If no arrangements are made A \$1 fee will be charged for every minute late after a 10 minute courtesy wait.
- When picking up your child you must come inside and walk your child out. Students will not be able to walk outside without a parent or guardian.

REQUIRES PARENT’S SIGNATURE:

You have my permission, in the event of an emergency and in case we are unavailable, to authorize any physician, nurse practitioner or medical personnel to examine, interview, test and if necessary, treat my child _____ as they may deem advisable.

Parent/Legal guardian name _____ Date _____

Parent/Legal guardian Signature _____ Date _____

Student Allergies _____

Student Medical Problems _____

Doctor _____ Phone number _____

Insurance carrier _____ Policy number _____

I hereby give permission to **Proletics Martial Arts & Fitness Center**, to photograph and/or videotape the student for educational or promotional purposes. _____ (Initial)

PARENT STATEMENT

I hereby state that (student's name) _____ is in good mental and physical health condition to participate in the activities provided by **Proletics Martial Arts and Fitness.,** including but not limited to all aspects of martial arts, fitness both indoor and outdoor. I am fully aware that any activity involving motion, height or athletic activity creates the possibility of serious injury. I hereby release **Proletics Martial Arts and Fitness., its employee and its staff** from liability to the above named athlete, of the person claiming through him/her, arising from injury to the person or property of the above named athlete occurring in the premises of **Proletics Martial Arts and Fitness,** including any event sponsored or sanctioned by **Proletics.,** and or travel to and from such activities.

I understand that **Proletics Martial Arts and Fitness.,** has the right to deny admittance to any student not meeting the standards of the program as it sees fit. I also agree not to hold these parties responsible in the event that my son/daughter/child engages in inappropriate conduct (including, but not limited to disruptive or volatile behavior in or out of camp, etc.) or becomes involved in any activity or with any persons not associated with **Proletics Martial Arts and Fitness.,** or its scheduled program and that **Proletics Martial Arts and Fitness.,** has the right to send him/her home for inappropriate conduct. I further attest that the information contained in this application is correct to the best of my knowledge. In addition, I have agreed to the policy and fee statement and agree to comply.

Parent Signature _____ Date _____