

Miami Lakes Art Academy ,Corp

Camp Registration

Name: _____ Address: _____

Home Phone Number: _____ Cell: _____ Email: _____

Mother's Name: _____ Cell: _____ Work Tel: _____

Father's Name: _____ Cell: _____ Work Tel: _____

Emergency Contact: _____ Cell: _____ Other: _____

Allergies or Medical Conditions: _____

Doctor's Name: _____ Tel: _____

- Registration: \$20

- Art Camp: \$100

Checks Payables to : Miami Lakes Art Academy, Corp.

Return this form to: Miami Lakes Art Academy, Corp: 5747 NW 152 ST Miami Lakes FL 33014

For more information call Miami Lakes Art Academy, Corp. at: 305-562-2236

Camp Hours: 8:00 AM to 6:00 PM (Drop off early by 7:30 AM & after care / late pick is an additional \$20 per week until 7:00 PM)

Campers must bring their own lunch with their name on it. NO REFUNDS REGISTER NOW SPACE IS LIMITED!!!

Parent/ Guardian Signature

Printed Name

Date