

Please Circle Desired Class and Session (one form per child)

Date/Time	Activity	Students Entering	Cost
Session 1: June 14-18			
9:00-12:30	<i>Science in the Water</i>	Preschool - Kindergarten	\$80
9:00-12:30	<i>French Fun</i>	Kindergarten - 3rd Grade	\$80
9:00-12:30	<i>The Magic of Words</i>	4th Grade - 8th Grade	\$80
1:00-4:30	<i>Sports</i>	1st Grade - 8th Grade	\$80
Session 2: June 21-24			
9:00-12:30	<i>Water Life</i>	Preschool - Kindergarten	\$80
9:00-12:30	<i>Theater</i>	1st Grade - 8th Grade	\$80
1:00-4:30	<i>Creative Clay</i>	Kindergarten - 3rd Grade	\$80
1:00-4:30	<i>French Fun</i>	4th Grade - 8th Grade	\$80
Session 3: July 12-16			
9:00-12:30	<i>Math in Motion</i>	Preschool - Kindergarten	\$80
9:00-12:30	<i>Theater</i>	1st Grade - 8th Grade	\$80
1:00-4:30	<i>Yoga & Creative Movement</i>	Kindergarten - 3rd Grade	\$80
1:00-4:30	<i>The Muppet Within</i>	4th Grade - 8th Grade	\$80
Session 4: July 19-23			
9:00-12:30	<i>Wild Things in the Woods</i>	Preschool - Kindergarten	\$80
9:00-12:30	<i>Theater</i>	1st Grade - 8th Grade	\$80
1:00-4:30	<i>Watercolor Exploration</i>	Kindergarten - 3rd Grade	\$80
1:00-4:30	<i>Tae Kwon Do</i>	4th Grade - 8th Grade	\$80
Session 5: July 26-30			
9:00-12:30	<i>Messy Mixtures</i>	Preschool - Kindergarten	\$80
9:00-12:30	<i>Theater</i>	1st Grade - 8th Grade	\$80
1:00-4:30	<i>Tae Kwon Do</i>	Kindergarten - 3rd Grade	\$80
1:00-4:30	<i>Creative Clay</i>	4th Grade - 8th Grade	\$80
Each Session			
7:30-9:00	<i>Early Day</i>	Kindergarten - 8th Grade	\$25/ wk
4:30-5:30	<i>Late Day</i>	Kindergarten - 8th Grade	\$25/wk

Summer Session Total _____

Circle T-shirt size: Youth: S M L Adult: S M L
 Payment Method: Cash _____ Check # _____ Visa _____ M.C. _____
 Card # _____ Exp. Date _____ CVV # _____

Mail to: The Kazoo School
 1401 Cherry Street
 Kalamazoo, Michigan 49008

Kazoo School Summer Session Registration Form (one per student)

Name _____ M _____ F _____

Grade in Sept. '10 _____ Current School _____

Address _____ City _____ State _____ Zip _____

Parents/ Guardian _____ Relationship to student _____

Home Phone _____ Work phone _____ Cell Phone _____

Parents/ Guardian _____ Relationship to student _____

Home Phone _____ Work phone _____ Cell Phone _____

Emergency Contact _____ Phone _____

Family Physician _____ Address _____ Phone _____

Dentist _____ Address _____ Phone _____

Hospital Preferred for Medical treatment _____

Medical Insurance Company _____ Policy Number _____ Subscriber _____

Medical Information (list current medications) _____

Allergies (if any) _____ Date of Last Tetanus Shot _____

Pick-up Authorization (Please list people authorized to pick up your child from Kazoo School)

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Authorization for Treatment of a Minor Child:

I authorize a representative of the Kazoo School to act in my behalf in case my child is a victim of accident, injury, or illness when immediate medical or surgical care is needed, provided the above named representative makes diligent effort first to notify me of the situation and obtain my preferences and consent. If such efforts to get in touch with me are unsuccessful, I consent on my behalf as his/her judgment dictates. If my preferred physician(s) is not available I authorize a representative of the Kazoo School to select a physician to provide treatment.

Signature of Parent/Guardian _____ Date _____

Authorization for Field Trip Participation

I give my permission for my child to participate in all Kazoo School Summer Session field trips.

Parent/Guardian Signature _____ Date _____

Authorization for Photo Release

I give Kazoo School my permission to use photographs of my child in advertising and promotional materials.

Parent/Guardian Signature _____ Date _____

Authorization for Early Day and/or Late Day use

I give permission to my child(ren) to use the Kazoo School Early Day and/or Late Day program on an emergency basis.

Parent/Guardian Signature _____ Date _____