



Mail registration to:
Marcy Gallardo
Imagination Circus Arts Camp
1518 Clayton Way
Erie, CO 80516

STUDENT INFORMATION

Name: Birth Date: AGE TSHIRTSIZE

Please make checks payable to: Imagination!
Tuition: \$285/child
Please check the sessions you are enrolling in:
Session I July 18-22 9:00am-3:00pm
Session II July 25-29 9:00am -3:00pm
How many children are you enrolling?
Discount information
Family and multiple week discounts apply:
For more information please contact:
By Phone 303 548 9340
By Email (Marcy Gallardo) marcy@imaginationcircusarts.com

FOR OFFICE USE ONLY
Total due:
Total Paid:
Date received deposit:
Check #:
Waivers received:

REFUND POLICY

An \$100 processing fee will be deducted from the tuition paid, if a student cancels his or her enrollment from camp before May 31st . Students canceling after May 31st. will not receive a refund. We reserve the right to cancel the camp at any time, in which case all tuition will be refunded in full.

CONTACT INFORMATION

Please submit the contact information for the parent that is coordinating the children's activities...so they may receive notices regarding important camp information.

Contact Parent or Guardian:

Address:

Home Phone: Work Phone:

Emergency Phone:

Contact Email:

EMERGENCY INFORMATION

Insurance company and Policy Number:

Emergency Contact:

I have read, understand, and agree to all terms, conditions and fees.

X Date

How did you hear Circus Camp camp? (please circle)
FRIEND BOULDER COUNTY KIDS DAILY CAMERA COLO HOMETOWN NEWS
Other: