9537 Braddock Rd
Fairfax, VA 22032
(703(764-0800
wkkick@gmail.com
www.wkfairfax.com

2023 Summer Camp Enrollment Form

Student Name _____ D.O.B _____

Address _____ Apt. # _____

Street City St Zip

Parent/Guardian's Name _____

Phone Numbers: Home _____ Cell _____ Work _____

Email _____

Emergency Contact: Name _____ Phone # _____

Insurance Name _____ Policy Number _____

Weeks Reserved

(If your child will not be attending the full week, indicate which days they will be here for that week)

◊ **SPRING BREAK April 3rd – April 7th**		◊ **July 17th —21st**
◊ **June 20th—23rd**	***Closed MONDAY	◊ **July 24th —28th**
◊ **June 26th —30th**		◊ **July 31st —August 4th**
◊ **July 3rd —July 7th**	***Closed MONDAY & TUESDAY	◊ **August 7th —August 11th**
◊ **July 10th —July 14th**		***NO CAMP THE WEEK BEFORE SCHOOL***

I certify that the student named above is in adequate physical health to participate in our karate program and the field trip activities scheduled.

_____ _____

PARENT SIGNATURE DATE

This should also serve as permission to have your child transported and to receive any and all emergency health care attention needed. As you are aware; very young children are prone to mishaps. Although we will make every effort to have adequate supervision, occasionally accidents will happen. In the instance that an emergency arises we would need your permission to transport and have your child treated by a professional care giver/physician, etc. This also serves as specific permission to transport your child to and from all offsite activities. World Karate reserves the right to remove any child from the program. This is for the safety and well-being of all students and staff. You are financially responsible for all weeks you select.

_____ _____

PARENT SIGNATURE DATE

Office use Only: Registration Fee _____ Fee Per Week _____ Total Weeks _____