

**Summer
Programs at
the Kate!**

Registration Form - Required of all participants

Please return to: **The Kate, 300 Main Street, Old Saybrook, CT 06475** or
email to Robin.Menzies@thekate.org

Due ASAP, no later than two weeks prior to the first day of session

Child's Name: _____	Date of Birth: _____	
Parent/Guardian: _____		
Street Address: _____		
City, ST, Zip: _____		
Home Phone: _____	Cell Phone: _____	Work Phone: _____
Email: _____		
Emergency Contact (<i>someone other than parent/guardian</i>): _____		
Relationship: _____	Phone: _____	
<input type="checkbox"/> Session 1 (7/6 - 7/10)	<input type="checkbox"/> Session 3 (7/20 - 7/24)	<input type="checkbox"/> Session 5 (8/3 - 8/7)
<input type="checkbox"/> Session 2 (7/13 - 7/17)	<input type="checkbox"/> Session 4 (7/27 - 7/31)	<input type="checkbox"/> Summer Spotlight (7/13-7/24)
T-Shirt Size (please circle): Youth - S M L Adult - S M L XL		

RELEASE OF LIABILITY: I release all rights and claims that might be had against The Katharine Hepburn Cultural Arts Center, its hired or contracted in-structors, their employees and agents, for all and any injuries or losses which may be suffered because of my child's participation in the above activity and authorize The Katharine Hepburn Cultural Arts Center and its employees/agents to provide emergency treatment on my child's behalf. I give permissions to have photographs of my child taken during the camp program and used for publicity purposes for The Katharine Hepburn Cultural Arts Center. I understand that the The Katharine Hepburn Cultural Arts Center will not be held responsible for any injuries sustained as a result of participation in this program. I also understand that I must carry accident and liability insurance for my child.

In the event of an emergency, we will call 911 and then try to reach you as soon as possible. Your child will be transported, if needed, to the Middlesex Hospital Emergency Clinic in Westbrook.

By signing here, I agree to the terms above and in the Kate's Camp for Kids or Summer Spotlight Policy Handbook.

Signature of Parent/Guardian

Date

This program will meet at The Katharine Hepburn Cultural Arts Center, 300 Main St., Old Saybrook. Payment is due with registration. We reserve the right to cancel the program due to insufficient enrollment.

OFFICE USE:	
Received: _____	<input type="checkbox"/> S1 <input type="checkbox"/> S2 <input type="checkbox"/> S3 <input type="checkbox"/> S4
INV: _____	<input type="checkbox"/> S5 <input type="checkbox"/> SP