## **REGISTRATION FORM**

COCA SUMMER ARTS CAMPS 2019

PLEASE PRINT. SUBMIT A SEPARATE REGISTRATION FORM FOR EACH CAMPER. COMPLETE BOTH SIDES.

NAME		PREFERRE	) NAME	MAIN	MAIN CONTACT PARENT/GUARDIAN IF UNDER 18.			
		CENIDED	ENAM ADDE	AECC BEOLUBED	HIDED DECEMENT CENTAGE FMAIL			
DATE OF BIRTH FAL	l'18 GRADE	GENDER	EMAIL ADDI	(ESS RECORRED	. RECEIPTS SENT VIA EMAIL.			
HOME TELEPHONE PLEASE INCLUDE AREA CODE.		CELL		WORK				
( )		( )		(	)			
HOME ADDRESS		CITY	STATE		ZIP CODE			
1	eceive theses texts	s, please supply y pply. COCA will no	our cell number and	d provider (A	are closing the building. In order to T&T, Verizon, etc.). Standard text with any third parties, and will only			
EMERGENCY CONTACT N	AME		RELATIONS	HIP TO STU	STUDENT			
HOME TELEPHONE PLEASE INC.	LUDE AREA CODE.	CELL			WORK			
( )		( )			( )			
INCLUSION SERVICES As part of the ADA, COCA is pleased to provi advance notice as possible, so we can work we contact the COCA Registration Office at regis  PICK UP PERMISSION	th the student's/camper's t	family to determine the l	pest plan of action and hav	on disabilities full) e plenty of time to	r engage in our programs. We ask for as much arrange for the aids or services required. Please			
I permit the following peopl	e (other than pa	rents/guardian	s) to pick up my	child. Maxi	mum of two.			
NAME TELEPI		HONE	RELAT	RELATIONSHIP TO STUDENT				
I permit my child (12 or olde	r) to sian himsel	f/herself out at	the end of the c	amp day	DI EASE CHECK			
				amp day				
Lhave read and agree to ALL								
I have read and agree to ALI SIGNATURE PARENT/GUARDIAN OR	-	OLLMENT		D.4.T.E.				
SIGNATURE PARENT/GUARDIAN OR	ADOLI STODENT SIGNATO	INE REQUIRED FOR EINR	OLLIVIENT		DATE			
NOTES OFFICE USE ONLY								

## **REGISTRATION FORM**

PLEASE PRINT. SUBMIT A SEPARATE REGISTRATION FORM FOR EACH STUDENT. COMPLETE BOTH SIDES.

COCA REGISTRATION FEE PLEASE SELECT ONE. REQUIRED FOR REGISTRATION

\$30 REGIST			ER STUD	ENT Take a	s many clas	ses or camps	s as you cho	ose for on	e annual regis	tration fee. Ti	nis fee is no	n-refundabl	e. \$
SELECT C	CAMPS								1				
CAMP CO	DE CA	CAMP TITLE IF FULL ADD ME TO WAIT LIST							CAM	P DATE	TUI	TUITION	
10150	sa	sample program							Jul 22–Jul 26 \$1!			155	
		YES NO											
		YES NO											
		YES NO											
		YES NO											
		YES NO											
		YES NO											
							YES	NO					
							☐ YES	NO NO					
							☐ YES	. Ц NO					
							YES	NO NO					s
SUPERVIS	SED BE MAY 28-31	1	<b>AND A</b> JUN 10–14		<b>ARE</b> JUN 24–28	JUL 1–5	JUL 8–12	JUL 15–19	JUL 22–26	JUL 29-AUG 2	AUG 5-9	AUG 12-16	-
7:30-9:00AM \$40 PER WEEK													
AFTER CARE 3:00-6:00PM \$75 PER WEEK													s
Gifts to the COCA Annual Fund helps support our programming, keep our tuition low and provide scholarships.  COCA ANNUAL FUND & SCHOLARSHIP SUPPORT  \$50 \$100 \$250 \$500 \$1000													
PAYMEN	ΓINFO	RMATI	ON										
Payment processing the schedu plan regist	fee due le belov	upon re v. <u>All re</u>	gistratio gistratio	n. Your cr <b>ns after</b> 2	edit card <b>April 30</b>	d will auto	omaticall	y be bi	lled in equ	ıal payme	ents acco	ording to	
DATES OF AUT													_
JANUARY FEBRUARY		March 1, April 1, May 1, June 1         MARCH         April 1, May 1, June 1           March 1, April 1, May 1, June 1         APRIL         May 1, June 1											
Only check	s are ac	cepted a	as payme	nt for ma	iled regi	stration f	orms. To	pay by	credit car	d, please			
register online or in person in COCA's Registration Office. To pay by cash, please register in person in COCA's Registration Office.  TO PAYT  S										- 1	L ENCLOSED		
QUESTIONS		call us w	ith any qu	uestions al	oout plac	ement or	registrati	on 314.	561.4898.	Thank You	•		
Date Rec'd	ISE ONLY	M P Initial Bio Process & Conf.				Initial							