



Summer Dance Camp

July 18 – July 29, 2011

7:30am-5pm

Ages 8-14 Welcome

Our two week Summer Camp includes technique classes in Hip-Hop and Modern Dance, games and craft projects, educational workshops, and fun field trips!

To enroll, call Camp Director Chris McCord

404-624-5295, ext. 245

or visit www.movinginthespirit.org



Summer Camp 2011 Information

Summer Camp, developed by the Moving in the Spirit Alumni, combines dance instruction with youth development workshops and recreational field trips. The two-week program provides campers with a safe environment where they can have fun while learning discipline, developing life skills and increasing self-esteem. Committed to personalized attention, our teachers nurture creativity within each camper and serve as role models. Moving in the Spirit's Summer Camp is for young people ages 8 – 14.

Schedule - Monday through Friday, July 18th – July 29th, 2011

Daily Drop-off time: 7:30-9 AM Daily Pick-up time: 5-5:30 PM*

*Please read the late pick-up policy in the Contract of Commitment

Scholarships

Need-based scholarships are available. To be considered for a scholarship, please submit a scholarship application in lieu of payment with your camp registration forms. **The deadline for submitting scholarship applications is June 1st.**

Cost

The total fee for the two-week camp is \$225. The fee includes dance classes, two enrichment field trips, leadership workshops and a performance. Payment may be made via cash, check or money order. Sorry, no credit cards accepted. Maximum Enrollment: 36 campers, Ages 8-14

Registration Requirements

-Student Information Form

-Parent & Dancer Contract of Commitment and Release Form

-Payment of \$225 or Completed Scholarship Application

Please mail these forms to: Moving in the Spirit Summer Camp - PO Box 17628 - Atlanta, GA 30316 or bring them to our offices at 750 Glenwood Avenue, Atlanta, GA 30316

Refunds and Withdrawal from Camp

To withdraw from camp, parents must notify the Summer Camp Director one full week before the first day of the camp, which is July 11, 2011. No refunds or transfers will be given after this date. When issuing refunds, Moving in the Spirit retains a \$30.00 cancellation fee per camper, per session. *Refunds will not be given for classes missed due to student absence.*

The camp program will consist of:

- Dance technique classes in Hip Hop, Jazz, African, and Modern
- Choreography classes where students learn a performance routine
- Game Time & Craft Projects
- Wildcard Classes featuring a variety of surprise topics
- Health and life skills classes
- Educational and recreational field trips
- A public performance on the final day of camp

Dress -All campers should wear cool, comfortable clothing that allows them to move freely. Girls may wear a leotard & tights; boys may wear a t-shirt & sweat pants. Please keep hair well groomed and pulled back. No shoes will be allowed on the dance floor. Please send your child to camp with clothes that are clearly marked with his/her name.

Food - Students should bring a sack lunch with drink that will be stored in a refrigerator. Students should eat breakfast before coming to camp.

End of Camp Performance - On the last Friday of camp, July 29, 2011, students will participate in a public performance to demonstrate what they have learned. The show will take place at The Beam at 6 PM. Admission will be \$3. On July 29th, students will remain at camp all day until the performance concludes. Parents, family and friends should arrive between 5:30-6 PM to be seated for the show.

If you have any questions, please call the Summer Camp Director, Chris McCord at (404) 624-5295, ext. 245



Student Information Form Summer Camp 2011 Age _____

Student's Information

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

County: _____ Resident of City of Atlanta? Yes No

Race/Ethnicity: _____ Gender: Male Female

Date of Birth: _____ Grade Level: _____

Student's School: _____

Please put me in class with my friend: _____ (friend's name here)

Relationship to Student: _____

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-mail: _____

Home Phone Number: _____

Work Phone Number: _____

Mobile/Pager Phone Number: _____

Is the Parent or Guardian also the Emergency Contact? Yes No

In case of emergency, contact: _____

Home Phone Number: _____ Work Phone Number: _____

Mobile/Pager Phone Number: _____

Medical conditions, allergies, etc. _____

Actions to be taken in case of allergic reaction: _____

Family Doctor/Pediatrician & Phone _____

Health Insurance Carrier: _____

Parent or Guardian Information

Emergency Medical Info

Optional Data

The following information is needed for statistical data related to Moving in the Spirit programs. It will not affect your child's participation in our programs and is kept confidential. Completion of this section is optional; however, your assistance is greatly appreciated.

Are you currently receiving public assistance? Yes No

If yes, list types (AFDC, SSI, etc): _____

Annual Household Income: _____

Number of people in your household, including the student: _____



Moving in the Spirit – Summer Camp 2011
Parent & Dancer Contract of Commitment

I realize that *Moving in the Spirit* will be teaching respect, discipline, commitment, responsibility, and accountability through dance. I understand that my child will be involved in the *Summer Camp*. For the purpose of maintaining a high quality standard in our technical progress, performance quality and personal growth, we ask that all parents and dancers thoroughly read, understand and agree to the following:

- I understand the late pick-up policy. If I arrive late to pick up my child, there will be a \$10 late fee. I need to pay the fee by the last day of camp in order for my child to participate in the end of camp performance. If I am unable to pick up my child on time, I will make arrangements with Chris McCord, the Summer Camp Director, and will still be charged a modified late fee.
- I understand that camp sessions are not available for me to observe, but that there will be a performance on the last Friday of my child's camp session at 6:00 p.m. If visits to class are necessary, I understand that I must schedule a visit through the Camp Director.
- I understand that camp representatives are available to answer questions in the mornings before camp starts as well as at the end of the camp day.
- I do hereby give my child permission to participate in any off-site field trips. I realize that if my child chooses to act in a manner that is inappropriate and disruptive off-site, I will come and pick him/her up at the site.
- I understand that tuition is due before the first day of camp. I understand that the total tuition is based on a 2-week fee for the total amount of instruction provided, not the number of days per week.

STUDENT:

I, _____, promise to do my very best to be respectful, responsible, and dedicated to learning throughout dance camp. I will be certain to put my best foot forward in everything I do, at home, at *Moving in the Spirit* and everywhere I may go. I know that I will have a lot of fun, but that I will also have to work hard during camp. I am committed and ready to learn. I plan to be here for the entire two-week session, so that I may reap the benefits and rewards of finishing what I start.

Student's Signature

Date

OVER →



Parental Consent And Release Agreement

***** PLEASE READ THIS AGREEMENT CAREFULLY.
IT IS A LEGAL DOCUMENT THAT AFFECTS YOUR RIGHTS *****

1. **Student's Participation.** I hereby consent to _____
[print name of student] ("Student") participating as a student in the Moving in the Spirit program and its related activities.

2. **Hold Harmless.** In consideration of Student participating in the Moving in the Spirit program, I hereby agree to release, indemnify and hold harmless, to the fullest extent permissible under the law, Moving in the Spirit, Inc. and its members, officers, directors, employees, contractors, volunteers, representatives, successors and assigns (the "Indemnified Parties") from and against any and all actions, claims or losses, whether known or unknown, anticipated or unanticipated ("Claims"), that might arise out of or in connection with the services provided or performed by any of such parties in connection with the Moving in the Spirit program, whether such Claims are based on negligence, strict liability, breach of warranty, contract or otherwise. In addition, I fully, completely, and unconditionally waive and release each of the Indemnified Parties from all rights, liabilities, duties, claims, charges, demands, actions, damages, costs, attorney fees, or expenses of any kind that I may have now or in the future against any of them relating to Student's participation as a student in the Moving in the Spirit program. The foregoing indemnifications, waivers and releases shall not apply to any Claims arising out of the sole negligence of any of the Indemnified Parties.

3. **Following Program Rules.** Student shall abide by the instructions, policies and regulations of Moving in the Spirit, Inc., as the same may be provided or related to Student or to me from time to time. I understand that any violation of such instructions, policies and regulations will result in suspension and/or termination of Student's participation in the program.

4. **Photo / Video Release.** I hereby grant to Moving in the Spirit, Inc. the right and permission, in respect of any photographs, video and/or audio recording which any of the Indemnified Parties take or have taken of Student, or in which Student may be included with others, to copyright the same in the name of Moving in the Spirit, Inc. or otherwise; to use, reuse, publish and re-publish the same in whole or in part, in conjunction with any printed matter in any and all media now or hereafter known, and for any purpose whatsoever, for illustration, promotion, art, advertising and trade, or any other purpose; and to use Student's name and any statement made by Student, in connection therewith if Moving in the Spirit, Inc. so chooses.

5. **Privacy and Confidentiality.** I understand that Student will be expected to keep any private and confidential information pertaining to Moving in the Spirit, Inc. and its other students, volunteers and staff private and confidential. I understand that Student's failure or inability to abide by such confidentiality requirements will result in suspension and/or termination of Student's participation in the program.



6. Transportation of Student. I acknowledge that Student will be transported by volunteers and other representatives of Moving in the Spirit, Inc. while participating in the Moving in the Spirit program. I consent to such transportation and agree that such transportation is voluntary and at Student's and my own risk.

7. Emergency Medical Care. In the event of a medical emergency, I authorize Moving in the Spirit, Inc., and its adult agents, employees and representatives into whose care Student has been entrusted to consent on my behalf to any medical treatment and hospital care to be rendered to Student in order to ensure Student's safety and well-being.

8. Contact with Student / Access to Information. I hereby give permission for any staff member or representative of Moving in the Spirit, Inc. to visit Student at her school and elsewhere outside my presence, for the purpose of furthering the goals of the Moving in the Spirit program. I hereby authorize Moving in the Spirit, Inc. to obtain any needed information regarding Student, including academic, behavioral and medical records, from school and medical personnel and to have conversation regarding the same with teachers, counselors, other school administrative staff, doctors, nurses and medical facility administrative staff.

9. Severability. In the event that any portion of this agreement is held to be invalid or unenforceable, the validity or enforceability of the remainder of this agreement shall be unaffected and shall remain valid and enforceable to the full extent permissible under law.

10. Governing Law. This agreement and any disputes arising under or in connection with it or the services provided by me or any of the Indemnified Parties shall be governed by the laws of the State of Georgia. I hereby submit to the exclusive jurisdiction of the state and federal courts of the State of Georgia for the settlement of any and all such disputes.

I certify that I am the parent or legal guardian of Student, or that I otherwise have the legal authority to represent Student and act on Student's behalf. I have read and understood this agreement. I hereby consent to and ratify this agreement and agree, on behalf of myself, Student, and each of our respective personal representatives, heirs and next of kin, to be bound by its terms.

Signature

Date

Printed Name

Relationship to Student



Scholarship Application Summer Camp 2011

Please return to PO Box 17628 Atlanta, GA 30316 or fax to (404) 624-5299

We at Moving in the Spirit are excited to offer the Scholarship Program. We want to provide an opportunity for all children who desire to dance. On a separate sheet, please state your reasons for need of support. Please be detailed. **To be considered, scholarship applications must be submitted with all requested forms and information by June 1, 2011.** For further questions, please contact Chris McCord, Summer Camp Director at (404) 624-5295.

Dancer's Name: _____ Birth Date: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Name of Parent(s) or Guardian(s): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____ Phone Number: _____

Are you married? Yes No

Mother's Occupation _____ Employer _____ Current Salary _____

Father's Occupation _____ Employer _____ Current Salary _____

All other income (rents, child support, Social Security, etc) \$ _____

Total combined family income (indicate monthly or annually) \$ _____

List the names and ages of all dependents (those you claim on our Federal Tax Forms)

1. _____ 4. _____

2. _____ 5. _____

I understand that I am completing an application for consideration of a scholarship at Moving in the Spirit. The application will be reviewed and I will be contacted for an interview if appropriate need is determined and money is available.

Please provide Moving in the Spirit with the following information, which shall remain confidential:

- **Copy of two (2) pays stubs/ a letter from your employer verifying your current salary or copy of Social Security or Disability checks/award letters.**
- **Copy of last year's tax return (form 1040 and W-2).**

Please read the following carefully:

By signing this application, I am stating my desire to receive a scholarship through Moving in the Spirit. I understand that Moving in the Spirit can reject my application without explanation. This information provided in this application is accurate to the best of my knowledge.

Parent's Signature: _____