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 New York, NY 10025
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 kidscreative.org

KIDS CREATIVE'S CREATE-A-PLAY SUMMER CAMP APPLICATION
July 2 – August 10, 2007

Child's First Name: _____ Last Name: _____ Birth Date: _____

School currently attending: _____ Grade Fall '07 _____

Address: _____ Zip: _____ Home Phone: _____

Parent/Guardian (1): _____ Parent/Guardian (2): _____

Day Phone (1): _____ Day Phone (2): _____

Cell Phone (1): _____ Cell Phone (2): _____

E-mail (1): _____ E-mail (2): _____

Emergency Contact: _____ Relationship: _____

Phone: _____ *(Adult available Monday-Friday 9:00-5:30)*

The Following adults are authorized to pick up my child:

Name: _____ Relationship: _____

Phone: _____

Name: _____ Relationship: _____

Phone: _____

(You have the responsibility to inform us if someone is not legally permitted to pick up your child or if someone other than those listed above is picking up your child. Let us know in advance in writing.)

MY CHILD IS AUTHORIZED TO GO HOME ALONE parent signature _____

How did you here about us? _____

COST: \$2,400 for 6 weeks (includes recording a free CD)
Register by February 23 and receive a \$200 discount!
Refer a friend who registers and receive a \$100 discount!
Siblings receive a \$200 discount
(Discounts not available with scholarships.)
Scholarships available for qualified families
 Please return this form with tuition payable by cash or check.
 Make Enclosed Checks Payable to: Kids Creative 404, Inc.
 MAIL TO: KIDS CREATIVE, 786 AMSTERDAM AVENUE, 5N,
 NEW YORK, NY 10025
 Pay by credit card online through at www.paypal.com, payee info@kidscreative.org
 QUESTIONS OR CONCERNS CALL: 646-485-5123
 EMAIL: adam@kidscreative.org