

# **Dothan and Enterprise Martial Arts Academy Summer Day Camp 2023**

## **Policy and Procedure**

**Registration:** Camp registration is processed on a first-come first-serve manner. Registration must be submitted prior to the first week of camp participation. **Registration begins February 6, 2023.**

There is a required registration fee of \$50 per child per summer camp year. Registration fees and all other camp fees and/or deposits are non-refundable. No exceptions.

**Camp Fees:** We offer two services: half day from 9am – 3pm and full day from 7:30am – 6:00pm. The fees vary depending on the deadlines. All weekly camp balances must be paid in full prior to the beginning week of the camp. Camp fees cover costs of all activities, any additional transportation, and field trips. Drop-in rates are available for \$59 for half day and \$89 for a full day. The drop-in rate is per day and includes any activity, additional transportation, and/or field trip fees for that day. A registration fee is not required for the drop-in rate.

Camp T-shirts are \$25 per shirt. The shirts must be worn on the field trip/activity days. The days to wear the t-shirts can be found on the camp schedule. We require at least 2 shirts be purchased per camper as we go on field trips frequently.

**Water World Season Pass will be required prior to camp attendance.**

### **Extra Service: Early Drop off/Late pick up**

Early Drop off before 7:30am = \$15

Late Pick up after 6:00pm = \$15

Both extra services = \$25

### **CAMP REGISTRATION DEADLINES:**

<b>Members on Base Membership</b>		
Half Day (weekly)	Full Day (weekly)	Deadline
\$130.00	\$150.00	March 3, 2023 (Early Bird)
\$150.00	\$170.00	April 10, 2023 (Regular)
\$160.00	\$180.00	May 12, 2023 (Late)
\$170.00	\$190.00	After May 13, 2023 (Rush)
<b>Members on Plus Membership</b>		
Half Day (weekly)	Full Day (weekly)	Deadline
\$115.00	\$135.00	March 3, 2023 (Early Bird)
\$135.00	\$155.00	April 10, 2023 (Regular)
\$145.00	\$165.00	May 12, 2023 (Late)
\$155.00	\$175.00	After May 13, 2023 (Rush)
<b>Members on Pro Membership</b>		
Half Day (weekly)	Full Day (weekly)	Deadline
\$108.00	\$128.00	March 3, 2023 (Early Bird)
\$128.00	\$148.00	April 10, 2023 (Regular)
\$138.00	\$158.00	May 12, 2023 (Late)
\$148.00	\$168.00	After May 13, 2023 (Rush)
<b>Weekly After School Students / Non-members (includes Taekwondo lessons)</b>		
Half Day (weekly)	Full Day (weekly)	Deadline
\$155.00	\$175.00	March 3, 2023 (Early Bird)
\$175.00	\$195.00	April 10, 2023 (Regular)
\$185.00	\$205.00	May 12, 2023 (Late)
\$195.00	\$215.00	After May 13, 2023 (Rush)

## Dothan and Enterprise Martial Arts Academy Summer Day Camp Application

Select your sessions: HD(half day 9am-3pm) or FD(full day 7:30am-6pm)	Week	Dates:	Extra Service (optional):
	Week 1	May 30 – June 2	<input type="checkbox"/> Late Pick up after 6:00pm \$15 per week
	Week 2	June 5 – June 9	
	Week 3	June 12 – June 16	<input type="checkbox"/> Late Pick up after half day 3~5:00pm \$15 per week
	Week 4	June 19 – June 23	
	Week 5	June 26 – June 30	
	Week 6	July 10 – July 14	
	Week 7	July 17 – July 21	
	Week 8	July 24 – July 28	
	Week 9	July 31 – August 4	

### CHILD'S INFORMATION

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M / F

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Swim level: (circle one) Non-Swim / Beginner / Intermediate / Advanced

Child's T-shirt Size: (circle one) Youth S / Youth M / Youth L / Adult S / Adult M / Adult L

### PARENT/GUARDIAN INFORMATION

1) Parent/Guardian's Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Place of employment: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

2) Parent/Guardian's Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Place  
of employment: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

### Person(s) authorized to pick up child or contact in case of an emergency:

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

If your child has and/or is receiving special education for the following, please check the appropriate box to facilitate adequate recreational opportunities.

\_\_\_\_\_ Vision      \_\_\_\_\_ Hearing      \_\_\_\_\_ Speech/Language      \_\_\_\_\_ Physical Therapy

\_\_\_\_\_ Other      Explain: \_\_\_\_\_

Are there any activities your child cannot participate in, due to physical, social, or religious reasons?  
(circle one) Yes / No

## RELEASE FOR EMERGENCY CARE

I hereby give my consent to any emergency facility and physician to administer necessary treatment to my child \_\_\_\_\_ in the event of an emergency at which time I cannot be reached. I give consent to transport by ambulance if situation warrants it.

Does the child require medication: \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please specify:

Medicine: \_\_\_\_\_ Dosage: \_\_\_\_\_ Time/Frequency: \_\_\_\_\_

Prescribing Doctor: \_\_\_\_\_ Phone#: \_\_\_\_\_

Has or subject to (check and give details):

\_\_\_\_\_ Allergy to medicine, food, plant, animal, or insect toxin

\_\_\_\_\_ Any condition that may require special care, medication, or diet

\_\_\_\_\_ ADHD (Attention Deficit Hyperactive Disorder)

\_\_\_\_\_ Asthma \_\_\_\_\_ Convulsions \_\_\_\_\_ Heart trouble \_\_\_\_\_ Contact lenses

\_\_\_\_\_ Diabetes \_\_\_\_\_ Fainting spells \_\_\_\_\_ Bleeding disorders \_\_\_\_\_ Dentures

Explain: \_\_\_\_\_

Physician's Name/Facility: \_\_\_\_\_ Phone #: \_\_\_\_\_

Health Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

### LIABILITY/RELEASE AUTHORIZATION FOR ALL ACTIVITY/PROGRAM AND TRANSPORTATION

**Please read the following and sign below**

I understand all terms and submit my application for the martial arts program contracted. By doing so, I release all liabilities (medical or otherwise) within this waiver from the programs offered at Dothan and Enterprise Martial Arts Academy.

Furthermore, I waiver all claims of liability and the right to sue the school, its employees, agents, and volunteers of Dothan and Enterprise Martial Art Academy I have given all information associated with my child or myself as required.

I understand that Dothan and Enterprise Martial Arts Academy cannot be held responsible for any accidents or other actions involving transportation, teaching, or other actions including those that result from neglect or improper behavior by my child or myself. I also agree that the school and its personnel are not responsible for or liable for any loss, damage or theft of any property belonging to the student even if its loss damage of theft occurs during the Dothan and Enterprise Martial Arts Academy's Summer Day Camp.

I understand that all funds are non-refundable, including any deposits made to the school for the summer camp activities. I also agree that I have provided the correct information to the best of my knowledge and approve of basic first aid when necessary.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## LUNCH

At Dothan Martial Arts Academy, children are given the option of bringing lunch from home or ordering from our catered lunch program. Catered lunch also includes snack. Students bringing lunch from home will need to bring their own snack to camp. Lunch payments can be included in the tuition payment and prices are as follows:

- 1 day per week: \$10.00/week
- 2 days per week: \$20.00/week
- 3 days per week: \$30.00/week
- 4 days per week: \$40.00/week
- 5 days per week: \$50.00/week

## LUNCH MENU (TBA)

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

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Parent Copy (Select the dates you want us to provide your child lunch from our lunch menu)

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Cut line:

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Office Copy (Select the dates you want us to provide your child lunch from our lunch menu)

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>