

# CASA Registration

Ready to enjoy Everything under the Sun at CASA? Register today! You can register online at [www.CASAtsheridan.org](http://www.CASAtsheridan.org), or mail us your completed form. Please note: applications must be filled out by a parent or guardian. . . and don't forget to sign your form!

## About your Child

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Sex:  Male  Female Age: \_\_\_\_\_ Date of birth: \_\_\_\_\_

School currently attending: \_\_\_\_\_ School attending in the fall '09: \_\_\_\_\_ Grade in the fall '09: \_\_\_\_\_

How did you hear of CASA? \_\_\_\_\_ What summer program (if any) did you attend last year? \_\_\_\_\_

Name of Person RESPONSIBLE for After-camp pick-up: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Child lives with Parent 1  Parent 2  Both Parents

Please tell us about your child's strengths and weaknesses: personality traits, social skills, and proficiencies. Feel free to write on a separate piece of paper, if needed. Include any additional information or concerns you might have that will help us provide the sunniest CASA summer for your child. Thank you!

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## About You

### Parent I

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Home Ph: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

Work Ph: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

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

### Parent II

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Home Ph: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

Work Ph: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

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

## Emergency Contact

In case of an emergency, every effort will be made to contact parents. In the event that a parent cannot be reached, CASA will contact the following person(s).

### Contact I

Full Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Ph: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

Work Ph: \_\_\_\_\_

### Contact II

Full Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Ph: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

Work Ph: \_\_\_\_\_

<i>Session I (June 15– July 2)</i>	<i>Session II (July 6– July 24)</i>	<i>CASA Sampler (July 27– August 7)</i>	<i>Deposit</i>
<input type="radio"/> Creative Little Kids (\$890) <input type="radio"/> Creative Juniors & Seniors (\$950) <input type="radio"/> Creative Apprentices (\$770)	<input type="radio"/> Creative Little Kids (\$950) <input type="radio"/> Creative Juniors & Seniors (\$950) <input type="radio"/> Creative Apprentices (\$820)	<input type="radio"/> <i>CASA</i> Sampler (\$640) <input type="radio"/> <i>CASA</i> Sampler CAPS (\$640) <input type="radio"/> <i>CASA</i> Sampler (\$200 Deposit)	<input type="radio"/> One Session (\$200 Deposit) <input type="radio"/> Both Sessions (\$400 Deposit)

*Extended Day / CASA Plus*

<i>CASA AM</i>	<i>CASA PM</i>
Early arrival is available for \$50 per week. The daily drop-in fee for early arrival is \$20	Extended after-camp hours are available for \$150 per week. The daily drop-in fee for afternoon extension is \$40.
<input type="radio"/> Session I (\$ 50 per week) Fee per morning: \$20 <input type="radio"/> Session II (\$ 50 per week) <input type="radio"/> <i>CASA</i> Sampler (\$ 50 per week)	<input type="radio"/> Session I (\$ 150 per week) Fee per day: \$40 <input type="radio"/> Session II (\$ 150 per week) <input type="radio"/> <i>CASA</i> Sampler (\$ 150 per week)

*Carpool List* *Camper Shirt*

Yes, please add my contact information to the *CASA* carpool list and send me a copy of the list when it is ready.

One free per camper! Please indicate size Children's sizes XS  S  M  L   
 Adults sizes XS  S  M  L  XL

*CASA Directory*

Yes, please add my contact information to the *CASA* camp directory

*Enclosed Payment*

Registering before February 28? Please take \$10 off your enclosed registration fee.

Session I (\$200 deposit).....\$ \_\_\_\_\_

Session II (\$200 deposit).....\$ \_\_\_\_\_

*CASA* Sampler (\$200 deposit).....\$ \_\_\_\_\_

Yes, I will contribute \$5.00 or \$\_\_\_\_\_ to the *CASA* Scholarship Fund.

TOTAL ENCLOSED (Check # \_\_\_\_\_) \$ \_\_\_\_\_

I authorize *CASA* at Sheridan School to charge my credit card for:

Credit Card Number: \_\_\_\_\_

Visa  Mastercard  Amex  Discovery

Expiration Month: \_\_\_\_\_ Expiration Year: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Except as stated in this application, the applicant is in good health and is capable of participating in all camp activities. In case of emergency, when neither parent(s) nor emergency contact(s) can be reached by phone, I give permission to the *CASA* Director, or in her absence to her designee, to arrange for emergency medical treatment for my child.

I have read the *CASA* camp brochure and give permission for my child to attend *CASA*. My child understands that she/he will be expected to follow all *CASA* rules.

I have enclosed a non-refundable deposit of \$200 for each session to reserve my child's place in the *CASA* program. I agree to pay the balance of tuition no later than May 8, 2009; otherwise, *CASA* will not hold my child's reservation.

I do  do not  give *CASA* permission to load video clips of my child on YouTube and *CASA*/Sheridan School's website.

I do  do not  give *CASA* permission to use photographs of my child and/or my child's artwork in promotional materials.

I do  do not  give permission for my child to participate in *CASA*'s off-campus field trips.

I understand that no refunds will be available after May 8, 2009.

\_\_\_\_\_  
 Signature of Parent/Guardian Print Name Date

**Please mail your registration and all pertinent forms to: *CASA* at Sheridan School; 4400 36th Street, NW Washington, DC 20008**

*For each session you are attending, please select three classes in each period listed in priority order.*

<i>Session I (June 15<sup>th</sup> – July 2<sup>nd</sup>)</i>	<i>Session II (July 6<sup>th</sup> – July 24<sup>th</sup>)</i>
1st Period 1 _____ 2 _____ 3 _____	1st Period 1 _____ 2 _____ 3 _____
2nd Period 1 _____ 2 _____ 3 _____	2nd Period 1 _____ 2 _____ 3 _____
3rd Period 1 _____ 2 _____ 3 _____	3rd Period 1 _____ 2 _____ 3 _____
4th Period 1 _____ 2 _____ 3 _____	4th Period 1 _____ 2 _____ 3 _____

*CASA Sampler (July 27<sup>th</sup> – August 7<sup>th</sup>)*

<i>CASA Sampler</i> <i>(For children in CJK, please write on the schedule form CJK)</i>	<i>CASA Sampler</i>
Period 1: <input type="radio"/> Art of All Nations <input type="radio"/> Drawing to Painting <input type="radio"/> Fitness Fun <input type="radio"/> Good Morning <i>CASA</i> <input type="radio"/> Watermania <input type="radio"/> Video Animation <input type="radio"/> Ceramic Tiles and Mosaics <input type="radio"/> Yoga <input type="radio"/> Talent Show	Period 3: <input type="radio"/> Drawing, Painting and Sculpture <input type="radio"/> Beginner Video <input type="radio"/> Team Games <input type="radio"/> Jazz/Hip Hop <input type="radio"/> Multicultural Vegetarian Cuisine <input type="radio"/> Acting and Improvisation <input type="radio"/> Pottery Studio <input type="radio"/> Wacky Water Games
Period 2: <input type="radio"/> Charcoal, Ink and Pastel <input type="radio"/> Watermania <input type="radio"/> Ceramics: Handbuilding <input type="radio"/> Make your own <i>CASA</i> Lunch <input type="radio"/> Hollywood Fild Crew (grades 4-7) <input type="radio"/> Mini-Musical <input type="radio"/> Modern Dance <input type="radio"/> Jewelry Making <input type="radio"/> Handball and Tennis	Period 4: <input type="radio"/> Watercolor and Acrylic Paint <input type="radio"/> Baking <input type="radio"/> Ballet <input type="radio"/> Newspaper (grades 3-9) <input type="radio"/> Clever Clay Creations <input type="radio"/> Chess for All <input type="radio"/> Shakespeare Workshop <input type="radio"/> Wacky Water Games
1st Period 1 _____ 2 _____ 3 _____	1st Period 1 _____ 2 _____ 3 _____
2nd Period 1 _____ 2 _____ 3 _____	2nd Period 1 _____ 2 _____ 3 _____
3rd Period 1 _____ 2 _____ 3 _____	3rd Period 1 _____ 2 _____ 3 _____
4th Period 1 _____ 2 _____ 3 _____	4th Period 1 _____ 2 _____ 3 _____

## Health Information

Camper's health insurance carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_ ID: \_\_\_\_\_

Doctor's name: \_\_\_\_\_ Doctor's phone: \_\_\_\_\_

Food allergies: \_\_\_\_\_

Drug allergies: \_\_\_\_\_ Environmental allergies: \_\_\_\_\_

Does the camper have asthma? \_\_\_\_\_ Does she/he need an Epi-Pen? \_\_\_\_\_

If your child requires an Epi-pen, please provide the *CAJSA* nurse with a photo of your child, as well as an Epi-pen labeled with your child's name. Thank you!

Does Camper take prescription medication?  Yes  No (If camper will be taking medication during the summer camp day a doctor's order form with directions is needed)

If your child takes prescription medications, please provide *CAJSA* with a copy of your doctor's directive for administering the medication, as well as a labeled supply of the medicine.

Please send a copy of your child's immunization record with this registration form, no later than May 8, 2009.

Please list any special conditions in your child's medical history that will help us take the best possible care of your camper. Thank you!

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at Sheridan School

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