

## **YOUNG INTELLECTS**

### **Application form for Back up Camps**

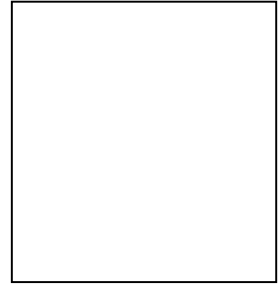
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## Application Form

Please complete each session in **BLOCK LETTERS**

### Section 1: CHILD'S PERSONAL DETAILS



1. Student name: \_\_\_\_\_ Gender: \_\_\_\_\_

School Name: \_\_\_\_\_ Grade as in Sep 2017: \_\_\_\_\_

2. Student name: \_\_\_\_\_ Gender: \_\_\_\_\_

School Name: \_\_\_\_\_ Grade as in Sep 2017: \_\_\_\_\_

Mother's/ Guardian's Name: \_\_\_\_\_ Mobile: \_\_\_\_\_

Father's/ Guardian's Name: \_\_\_\_\_ Mobile: \_\_\_\_\_

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

### Section 2 : EMERGENCY CONTACT DETAILS

Name: \_\_\_\_\_ Mobile: \_\_\_\_\_

Name: \_\_\_\_\_ Mobile: \_\_\_\_\_

### Section 3: PROGRAM DETAILS

Checkmark the program you have signed up for:

Back Up Camps

Thanksgiving Camp	Christmas Camp	Spring Camp

**Section 4: DIETARY RESTRICTIONS**

If your child has any dietary restrictions or allergies that we should be aware of, kindly mention below along with the person of contact and number to contact in time of emergency.

Dietary restrictions: \_\_\_\_\_

Allergies: \_\_\_\_\_

Contact Person & Mobile: \_\_\_\_\_

**Section 5: RULES & REGULATIONS**

1. The staff must be informed if the child is absent.
2. Fees must be paid up front.
3. The program ends at 6PM. There will be an extension of grace for the first late pick up. After that, there will a late fee for every 5 minutes past 6:05PM.

**Section 6: CONSENT TO VIDEOTAPE / PHOTOGRAPH**

We have you consent to videotape/ photograph your child.

Yes

No

I have read and will comply with all instructions written above and cooperate with the staff of Young Intellectuals to work in unison toward the main goal.

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

Date: \_\_\_\_\_