

Ventnor Cultural Arts Center

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Summer Arts Camps Registration Form

Campers Name_____ Age_____

Parent/ Guardian_____

Email_____

Address_____

Phone_____ Back Up # _____

Camper has permission to play on playground during snack break _____ initial

*Camps are \$180 per week Monday -Friday 9 am-12 noon

1. July 8th -12th _____ or Dance Camp 1 _____

2. July 15th-19th - _____ or Dance Camp 2 _____

3. July 22nd-26th _____

4. July 29th -Aug.2nd _____

Per Day \$40 _____

Total Due_____ Paid_____ cash_____ ck#_____ PayPal_____ cc_____

*Make checks payable to VCCAC - mail to 6500 Atlantic Ave. , Ventnor, N.J. 08406

Payment via Pay Pal available (3% fee) email ventnorarts@gmail.com to request a link

*Provide snacks/drink each day and sunscreen if needed. Inform staff of any health issues.

