

2010 RHAPSODY Hip-Hop Summer Arts Camp Registration Form

Student Name _____

Address _____

City, State Zip _____

Phone () _____ Email _____

School _____ Age _____ Birth date: _____

Grade entering in fall _____

Additional Registration (from same household):

Student Name _____

Age _____ Grade entering in fall _____ Birth date: _____

Parent or Guardian Name(s): _____

Camp is limited to students age 11-18.

Please indicate number of registrants next to corresponding camp cost:

_____ Early Registration: \$225 before May 14, 2010
_____ Regular Registration: \$275 May 15-July 2, 2010
_____ Late Registration: \$300 after July 2, 2010
_____ 10% Discount for Additional Student from Same Household:
\$ _____ fill-in amount

TOTAL NUMBER OF REGISTRATIONS: _____ TOTAL ENCLOSED FEES \$ _____

Please return this form and enclose fee (check or money order) payable to:

Progressive Arts Alliance

To pay by credit card or to pay your registration fee in installments, please call PAA at 216-772-4PAA (4722).

This registration form and payment should be mailed to:

Summer Camp Registration
Progressive Arts Alliance
2310 Superior Avenue East Suite 280
Cleveland, OH 44114

You will receive a registration confirmation letter.

***PLEASE NOTE: Your summer camp registration must be paid in FULL the first day of camp or your student will not be permitted to participate in camp activities.