



HILL IRISH DANCE SCHOOL

OKLAHOMA – STILLWATER

Certified Teacher: Jean Hill, TCRG

1720 NW 37th Street, Oklahoma City, OK 73118
(405) 524-7322 www.hillirishdance.com

CELTIC CAMP JULY 25-29, 2011 REGISTRATION

Please make checks payable to Jean Hill and mail with registration form to:
1720 NW 37 St., Oklahoma City, OK 73118

Student Name _____ Age _____ Boy Girl

Parent Name _____ Phone _____

Address/City/Zip _____

Email _____

T-Shirt Size (please circle one): Youth S M L XL / Adult S M L XL

Emergency Contact _____ Phone _____

Medical/Allergy Info _____

**Please inform director if your child has medications with him/her.*

CAMP SELECTION

- 3/4 Day Camp 9am–1:30pm
- Full Day Camp 9am–4pm

DANCE LEVEL

- Beginner
- Intermediate
- Advanced

MUSIC LEVEL

- Beginner
- Intermediate
- Advanced

HAVE PENNY WHISTLE?

- Yes (in Key of D)
- No

FEES

3/4 DAY CAMP: \$110 if paid by July 8th (\$120 after July 8th)

FULL DAY CAMP: \$165 if paid by July 8th (\$180 after July 8th)

BEFORE AND AFTER CARE: \$8 per day (\$4 per day mornings, \$4 per day afternoons)

BEFORE: (please circle): Mon Tue Wed Thu Fri • AFTER: (please circle): Mon Tue Wed Thu Fri

Limited scholarship funds are available. Contact Camp Director, Jean Hill, for more information:
hill_jean@sbcglobal.net, 405-524-7322.

Total Enclosed: _____

RELEASE: I consent to have my child participate in programs offered by Hill Irish Dance School. I agree to waive and release all rights and claims for damages that I may have against this organization or its representatives, whether paid or volunteer, for any injuries or damages in connection with dance or other activities associated with Celtic Camp.

PERMISSION FOR MEDICAL TREATMENT: I authorize simple first aid and consent to any medical intervention deemed necessary. I have informed the instructors of any health issues that may affect my child during dance activities.

Parent/Guardian Signature: _____ Date: _____

Physician's Name: _____ Phone: _____