

Parent Name \_\_\_\_\_

Child 1 Full Name \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Child 2 Full Name \_\_\_\_\_

Email\*(required) \_\_\_\_\_

Date of Birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Phone \_\_\_\_\_

Child 3 Full Name \_\_\_\_\_

Save time and register over the phone! 503.229.0627

Date of Birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

### CHOOSE YOUR CAMP DATES

#### JUNE WEEK ONE, JUNE 17-21

Purple Group (ages 4-5)	\$250 x # of kids _____	=	\$ _____
Red Group (ages 5-6)	\$250 x # of kids _____	=	\$ _____
Yellow Group (ages 7-8)	\$275 x # of kids _____	=	\$ _____
Green Group (ages 9-10)	\$300 x # of kids _____	=	\$ _____

#### Afternoon Adventure

Purple Group Afternoon Adventure	\$175 x # of kids _____	=	\$ _____
Red Group Afternoon Adventure	\$175 x # of kids _____	=	\$ _____
Yellow Group Afternoon Adventure	\$175 x # of kids _____	=	\$ _____
Green Group Afternoon Adventure	\$175 x # of kids _____	=	\$ _____

#### JUNE WEEK TWO, JUNE 24-28

Purple Group (ages 4-5)	\$250 x # of kids _____	=	\$ _____
Red Group (ages 5-6)	\$250 x # of kids _____	=	\$ _____
Yellow Group (ages 7-8)	\$275 x # of kids _____	=	\$ _____
Green Group (ages 9-10)	\$300 x # of kids _____	=	\$ _____

#### Afternoon Adventure

Purple Group Afternoon Adventure	\$175 x # of kids _____	=	\$ _____
Red Group Afternoon Adventure	\$175 x # of kids _____	=	\$ _____
Yellow Group Afternoon Adventure	\$175 x # of kids _____	=	\$ _____
Green Group Afternoon Adventure	\$175 x # of kids _____	=	\$ _____

#### AUGUST DANCE CAMP, AUGUST 5-9

Purple Group (ages 4-5)	\$250 x # of kids _____	=	\$ _____
Red Group (ages 5-6)	\$250 x # of kids _____	=	\$ _____

Preferred early registration discount (registration received before March 15): - \$25

OR: Early registration discount between March 15 and April 15: - \$15

Multiple child discount (if registering 2 or more children): - \$15

**TOTAL \$** \_\_\_\_\_

### PAYMENT

<input type="checkbox"/> Check (payable to BodyVox)	Name as it appears on card _____
<input type="checkbox"/> Visa <input type="checkbox"/> Master Card	Card Number _____
<input type="checkbox"/> Amex <input type="checkbox"/> Discover	Exp. Date _____ / _____ Security code _____
	Signature _____

Email or mail your completed form to:

Email: heather@bodyvox.com • BodyVox Dance Center • 1201 NW 17th Ave. • Portland, OR 97209

No refunds after June 1 for the June Camps. No refunds after Aug. 1 for the August Camp. No refunds on any unattended days.