

# Summer Camp Registration Form 2018



**Please complete this form in full and return it to the ASK Business Office with payment of 200KD. (10-14<sup>th</sup> & 18<sup>th</sup>-21<sup>st</sup> June 2018)**  
**CAMP IS DEPENDENT ON SUFFICIENT ENROLMENTS**

Student Name:	Age as of June 10 <sup>th</sup> , 2018:
Current School:	Grade Level Successfully Completed:
English Language Abilities (circle one): Beginning      Developing      Proficient	Allergies or Special Medical Needs:

## Family Information (please print especially the EMAIL address)

Father's Name:	Mobile Phone:
Mother's Name:	Mobile Phone:
Home Phone:	E-mail Address:

Sibling Attending Camp:	Gender:	Age:
Sibling Attending Camp:	Gender:	Age:

## Placement Requests

(Although there are no guarantees, we will attempt to accommodate placement requests if feasible.)

I would like my child to be placed with the following friend/relative/sibling:

Fellow Camper's Full Name:	Gender:	Age:
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I hereby submit this application for my child to attend ASK's Summer Camp. I agree to ensure that my child will abide by the rules of the camp. I understand that if ASK Summer Camp staff members are unable to contact me regarding my son's/daughter's health, or if an emergency should occur, a Summer Camp official will address my son's/daughter's medical needs and/or contact the appropriate medical personnel.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**See next page for media release consent and field trip consent**

**SUMMER CAMP MEDIA CONSENT** (allowing your child to be photographed or videoed)

For valuable consideration received, I, (campers name) \_\_\_\_\_  
(The subject or "Model"), hereby grant permission to the above media artist, educator, ASK, and their subsidiaries and affiliates, to photograph, video and/or use my likeness, image, name, voice, statement(s) and/or performance(s), as recorded by any means and in any medium (including but not limited to social media properties) existing now or developed in the future, in any and all images created directly or indirectly without further approval by me.

I also grant permission to use, edit and/or modify the images, in any manner, form or medium. I hereby waive any and all rights that I may have to inspect or approve the media or the use to which they may be applied.

This Agreement constitutes the entire agreement between the parties regarding its subject matter and may only be amended in a writing signed by both parties.

Campers Name (YOUR NAME PRINTED): \_\_\_\_\_

By the camper (signature): \_\_\_\_\_

The signature of your Parent or Legal Guardian is required.

Signature of Parent/Legal Guardian: \_\_\_\_\_

Name of Parent/Guardian (PRINTED): \_\_\_\_\_

Relationship to Camper Named Above: \_\_\_\_\_

I DO NOT consent for my child to be photographed or videoed during the summer camp.  
(Tick the box please).

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**SUMMER CAMP FIELD TRIP CONSENT (tick one box below please)**

I consent for my child to attend one field trip outside of school during the summer camp. I understand that students will be traveling by bus. (Tick the box please).

I do not consent for my child to attend the field trip outside of school during the summer camp. I understand that my child may not be accommodated at camp that day. (Tick the box please)

Signature of Parent/Legal Guardian: \_\_\_\_\_

Name of Parent/Guardian (PRINTED): \_\_\_\_\_