



# Enso Center for International Arts

8708 196<sup>th</sup> Ave NE Redmond, WA 98053

425.869.0276 ----info@ensocenter.org

## Summer Camp Registration

Name \_\_\_\_\_ M/F \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Address 1 \_\_\_\_\_ Phone (cell) \_\_\_\_\_

Address 2 \_\_\_\_\_ Phone (home) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (work) \_\_\_\_\_

Enter email contact information for the person being registered.

This should be your primary contact email.

If this registration is for a minor you can specify parent email contact information.

Email\* \_\_\_\_\_

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

\*By providing my e-mail address, I give Enso Center permission to contact me via e-mail.  
We respect your privacy. Your information will never be shared.

### Note: Please fill out BOTH sides of this form

All information on this form remains at Enso Center and will not be shared by any other parties.

I realize that participating in Enso Center classes poses some risk of physical injury. I understand that I should participate in the classes only if I am medically able as determined by a physician and properly trained. I agree that instructors may authorize and/or provide emergency and/or basic first aid treatment for me. I assume any and all risks associated with participating in the classes including but not limited to: broken bones, sprains, contusions, internal and head injuries or illness. Such injuries may result from the following and other conditions or activities: falls, breaking boards, contact with students, instructors, and other participants, overexertion, surface conditions of the floor and walls, and lighting of the facility.

I waive, release, and discharge Enso Center, instructors, and any other persons connected with the classes from any and all claims or liability arising out of my participation even if that claim arises due to negligence or carelessness. I also agree that Enso Center may use, for publicity or promotional purposes, my name or pictures of me participating without liability or obligation to me.

Date \_\_\_\_\_

Signature (or signature of Parent if under age 18) \_\_\_\_\_

Printed name of parent if student is under age 18 \_\_\_\_\_

\_\_\_\_\_ Registered thru Redmond Parks & Rec

Please select camp week:

- \_\_\_\_\_ Kids Summer Camp July 16-July 20, 2012
- \_\_\_\_\_ Kids Summer Camp July 23 - 27, 2012
- \_\_\_\_\_ Kids Summer Camp Aug 6 - 10, 2012
- \_\_\_\_\_ Teen Camp June 25 - 29, 2012

T-shirt Size: Child S M L Adult S M L XL

**Cost: \$175 includes T-shirt and supply fee – Full payment preferred at registration**  
**\*Cancellation with refund requires 1 week notice.\***

Please bring a sack lunch. We'll be walking over to Perrigo Park for our lunch. Some snacks provided.

Friday night of each camp we will offer a demonstration. Your children will perform their new skills for you!  
This is an optional attendance but one you won't want to miss!

Name:



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Emergency Contact(s):

\_\_\_\_\_ Ph# \_\_\_\_\_ Relationship \_\_\_\_\_

\_\_\_\_\_ Ph# \_\_\_\_\_ Relationship \_\_\_\_\_

Other family members currently enrolled in Enso Center programs:

\_\_\_\_\_ Relationship \_\_\_\_\_

\_\_\_\_\_ Relationship \_\_\_\_\_

\_\_\_\_\_ Relationship \_\_\_\_\_

\_\_\_\_\_ Relationship \_\_\_\_\_

\_\_\_\_\_ Relationship \_\_\_\_\_