



SUMMER ARTS CAMP 2020 - Weekly availability, June 29 - August 7, 2020

REGISTRATION FORM

**TO ENROL, PLEASE RETURN REGISTRATION FORM AND TUITION TO: Creative Lounge Art Studio
2656 Honolulu Ave
Montrose, CA 91020**

Student Name _____ Date of Birth _____ Child

Age: _____

Street Address _____ Phone _____ City, _____

Zip _____ Email _____

Parents Name _____ Work Phone _____ My child attends
school at: _____

EMERGENCY CONTACT _____

As parent/guardian of the above student, I authorise only the following (other than parent) to be contacted in case of an emergency.

Name _____ Relation to
child _____ Phone _____

Weekly Rate: \$240.00

Week(s): _____

WEEK 1: JUNE 29-JULY 3 UNDER THE SEA	8:30-11:30	12:00-3:00
WEEK 2: JULY 6 – 10 LOVE NATURE & ANIMALS	8:30-11:30	12:00-3:00
WEEK 3: JULY 13 – 17 IMAGINATION	8:30-11:30	12:00-3:00
WEEK 4-JULY 20 - 24 SPLASH COLOR	8:30-11:30	12:00-3:00
WEEK 5-JULY 27 - 31 TROPICAL BREEZE AND PALM TREES	8:30-11:30	12:00-3:00
WEEK 6-AUGUST 3 - 7 CREATIVITY AND TECHNIQUE	8:30-11:30	12:00-3:00



Creative lounge

Release of Liability & Medical Emergency

The undersigned, legal custodian of _____
a minor, hereby authorizes Creative Lounge Director or designee, in whose care the
aforementioned pupil has been entrusted.

As the legal parent or guardian, I release and hold harmless to the business doing business as
Creative Lounge Art Studio, its owners, operators from any and related to any loss, damage, or
injury, including death, that may be sustained by the participant and/or the undersigned, while
in or upon the premises or any premises under the control and supervision of Creative Lounge
professionals, its owners and operators or in route to or from any of said premises. _____

Medical Emergency

The undersigned gives permission to the business doing business as Creative lounge art Studio,
its owners, and operators from any and all liability to seek medical treatment for the participant
in the event they are not able to reach a parent or guardian. I hereby declare any physical/
mental problems, restrictions, or condition and/or declare the participant to be in good physical
and mental health.

DOCTOR: _____ DAYTIME PHONE _____

HOSPITAL PLAN: _____ GROUP # _____

My child is allergic to the following medications:

Other medications used: _____

**ALL PRESCRIPTION MEDICATION WILL BE SELF-ADMINISTERED BY THE CHILD, CENTER FOR Creative
Lounge IS NOT LIABLE FOR ANY MEDICATION SELF-ADMINISTERED DURING CAMP.**

Behavioural/Health Issues/Food & Environmental Allergies

I have read and understood the above: releasing my child for emergency medical treatment
and Creative Lounge protocol for self-administered
medications.

Signature of Parent/Guardian: _____ Date: _____



Creative lounge

Camp Policies and Procedures

Registration and cancellation information are detailed below. All camp weeks are available on a first come, first serve basis. Reservations cannot be made without tuition.

PHOTOGRAPHY/FILM DOCUMENTATION OF ACTIVITIES/CAMPERS:

PLEASE SEE ACCOMPANYING MINOR PHOTO RELEASE FORM.

My signature below indicates that I have read this entire document as well as the camp catalogue and understand both completely and agree to their terms.

Signature _____

Print _____ Date _____

REGISTRATION RECEIVED BY: _____ DATE: _____

TUITION:

PAYMENT INFORMATION

Cash _____ Ck _____ # _____

Welcome to Creative Lounge Art Studio!

Students are asked to dress informally with casual, loose, and comfortable clothing. Any type of dress that will restrict the student from fully engaging in the art making process should not be worn. Art making is often a messy process, and children will get messy! Please use common sense when dressing for art class. Behavioral Policy Students should conduct themselves in a respectful manner with both fellow students and instructors alike. Students are asked to respect the work and space of other students as well as the studio environment in general.



COVID-19 Protocols

CREATIVE LOUNGE SUMMER CAMP GUIDELINES:

- **OUR STAFF HAS WORKED DILIGENTLY TO IMPLEMENT PROTOCOLS AS RECOMMENDED BY THE ADHS AND CDC, AND WE ARE EAGER TO SERVE OUR STUDENTS WITH THEIR HEALTH AND SAFETY AS OUR FIRST PRIORITY.**
- **ALL REGISTRATIONS AND PAYMENTS MUST BE PROCESSED ON VENOM OR CHECKS.**
- **SMALLER CLASS SIZES**
- **ROUTINE HAND WASHING & SANITIZING FOR STUDENTS AND TEACHERS**
- **ROUTINE DISINFECTING OF THE STUDIO DURING AND AFTER CAMP**
- **DROP-OFF / PICK-UP WILL TAKE PLACE OUTSIDE THE STUDIO DOORS, ONLY STUDENTS ALLOWED IN THE STUDIO**
- **TEMPERATURE CHECK FOR ALL STUDENTS BEFORE ENTERING THE STUDIO**
- **WE WILL PRACTICE SOCIAL DISTANCING WITHIN THE STUDIO TO THE BEST OF OUR ABILITY**
- **MASKS AND TEMPERATURE CHECKS FOR STUDIO STAFF**
- **STUDENTS WILL BE PROVIDED WITH THEIR VERY OWN MATERIALS WHICH THEY WILL TAKE HOME AND BRING TO CLASS EVERY DAY**
- **ALL THE MATERIALS PROVIDED ALONG WITH THE TABLES AND CHAIRS USED, WILL BE DISINFECTED AND SANITIZED BEFORE AND AFTER USE**
- **WE WILL PROVIDE HAND SANITIZERS AND DISINFECTING WIPES FOR THE STUDENTS**
- **IF NEEDED GLOVES WILL BE PROVIDED FOR STUDENTS**
- **WE ARE LIMITING THE NUMBER OF THE STUDENTS TO BE ON THE SAFE SIDE.**
- **STUDENTS WILL BE REQUIRED TO BRING THEIR OWN SNACK**