



# Summer Camp Registration Form

**“Reveal Your Greatness”**

Summer Camp 2009

2001 COIT RD  
SUITE # 210  
PLANO, TX 75075

NW CORNER @  
Park & Coit

972.596.1400

REVELATION  
DANCESTUDIO  
@VERIZON.NET

**Shirt size  
(Circle  
one)**

Youth  
Sm

Youth Md

Youth  
Lg

Adult Sm

Adult  
Md

Adult Lg

10% off BULK  
SIGN UP

10% off  
siblings

June 15-19		June 22-26	
Full Day	Half Day Am or PM	Full Day	Half Day AM or PM

July 13-17		July 20-24		July 27-31	
Full Day	Half Day Am or Pm	Full Day	Half Day AM or PM	Full Day	Half Day AM or PM

<b>Student Info.</b>					
Name					M / F
Date of Birth			Age		
Grade		Medical Info/Allergies			
Address					
City		State		Zip	
Student cell		Student email			

<b>Payment Type</b> Cash Check CC Other	
<b>Camp Tuition</b>	
<b>Total</b>	

<b>Provide contact info for Parent /Guardian responsible for billing of account</b>					
Name				Relationship to student	
Address					
City		State		Zip	
<b>Phone</b>	Home		Work		Cell
<b>Email</b>	Personal				
<b>Other Info</b> <b>Camp Fees are non-refundable unless Revelation cancel's the camp due to enrollment. A Summer Camp Waiver must be signed in addition to this registration form. By signing this registration form I, _____ (parent. Guardian) have read and signed the Studio Policies and Liability Waiver for each child registering for summer camp.</b>					
Signature Parent/Guardian				Date	