Sutradhar Institute of Dance & Related Arts

**Camp Ramayana -- June 23 - July 18, 2014**

**Camp Kuchipudi –- June 30 – July 25 2014**

1525 Forest Glen Road Silver Spring MD 20910

301-593-2664 www.dancesidra.org

TIN: 52-1940780

Please complete all pages and return to SIDRA. Fill out one form per child.

**Camper Information**

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name Called: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male\_\_\_\_ Female \_\_\_\_

Home Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Entering In Fall 2014: \_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has this camper attended a SIDRA camp before?

 If Yes – When?

 If No – How Did You Find Out About SIDRA?

**Parent/Guardian Information**

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address (if different from camper)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Email (please give us an email which is checked daily!) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cellphone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work Number \_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address (if different from camper)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Email (please give us an email which is checked daily!) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work Number \_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact (Other Than Parent/Guardian)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship To Camper \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expected Attendance and ***Weekly Breakdown of Fees***

Ramayana Camp is designed as a month long camp. Each week builds on the previous week’s activities. In addition, participants learn and practice the dances for the play, The Ramayana, which is performed at the end of camp.

**The total cost of the four week Camp Ramayana is $990.00. This includes:**

A total initial payment of **$520.00 which includes a non-refundable r**egistration fee of **$70.00 due**

Final payment is due by June 16, 2014 and is **$470.00**

There will be an additional costume rental fee of $25 for the Ramayana Camp performance. This will be due prior to collection of their costume.

*If your child will only participate in certain weeks, please indicate that here. Please note that partial attendance will impact your child’s ability to fully participate in the final performance. Fees will include the $70 deposit, plus a prorated amount.*

* Week one (June 23- June 27)
* Week two (June 30 – July 4, note: July 4 is a holiday)
* Week three (July 7 – July 11)
* Week four (July 14 – July 18 note: the final performance is scheduled for Thursday, July 17)

**The Total cost of Camp Kuchipudi is $525, which includes the registration fee.**

Before Care and After Care

Please indicate if your child will require beforecare and/or aftercare. Available hours for daycare are 8-9am and 4-6pm. The cost is $10an hour, $30 per day, $150 per week, and $500 for the entire summer camp. Payment for daycare is due no later than the Friday prior to the week you are requesting care.

* Week one (June 23- June 27)
* Week two (June 30 – July 4, note: July 4 is a holiday)
* Week three (July 7 – July 11)
* Week four (July 14 – July 18 note: the final performance is scheduled for Thursday, July 17)

Please indicate if your child has any allergies.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please make your check payable to Sutradhar Institute. There is a $25 fee for returned checks. No refund for base tuition.

Consent and Release: I certify that I/my child am/is in good health and is capable of participating in all the institute’s activities and classes. I have read and understand that I am responsible for tuition payments as described. I hereby give permission for the Sutradhar Institute of Dance and Related Arts to take and use photographs for promotion purposes for the institute. I release the Sutradhar Institute of Dance and Related Arts, its agents and employees, from all liability for personal injury, illness, or personal property damage occurring on or off SIDRA’s premises.

**Total amount enclosed:\_\_\_\_\_\_\_\_\_\_\_\_ Check #\_\_\_\_\_\_\_\_\_\_**

***Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**REFERENCE SHEET**

**CAMPER LUNCH/SNACKS**

You are required to provide a lunch each day. Campers will be given healthy snacks and drinks during our designated snack times during the day. We will provide refrigeration and fresh drinking

water throughout the day.

**CANCELLATIONS**

The parent/guardian agrees and understands that in case of dismissal, homesickness or voluntary

withdrawal, there will be no refund of camp fees. If it is deemed advisable by camp to send a camper home due to medical reasons, the parent must provide a doctor’s note and request in writing for a pro rate refund. **There will be no refund on cancellations made within five days of the beginning of camp.**

**EQUIPMENT**

Please do not allow your campers to bring items of value to camp. We cannot be responsible for lost, misplaced, stolen or damaged items or money. Please mark all campers’ belongings with their name. Please remember cell phones and other electronic devices are not permitted on camp.

**HEALTH FORM**

Each camper must have a completed health form on file before attending camp. This is a Maryland State law. **(Form enclosed)**

**PARENT/COUNSELOR CONFIDENTIAL FORM**

The information on this form aids our staff in understanding your child and your objectives in sending them to camp. Please complete it and mail to SIDRA at least two weeks prior to your

child’s arrival. The information on this form remains confidential with the SIDRA staff and counselors. **(Form enclosed)**

**SIDRA CONFIDENTIAL CAMPER INFORMATION FORM**

**This form MUST be completed by parent/guardian and returned to camp one week before your child is to attend camp.** We have designed this form to develop better communication between you and our staff. **Please use the back of this form, if needed for more information that will help us give your child a better experience.**

Camper's Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list your child’s hobbies and interests. What adjectives describe your child?

Please provide any other information you feel may put us in a better position to understand your child/children and her/his needs.