Bostock's Registration

Membership Registration

Name:	DOB:
Name:	DOB:
Name:	DOB:
Address:	
Home Phone:	Cell Phone:
Emergency Contact:	Phone:
Email:	
Method of Payment:	
CC#:	exp: /
Checking Account	Bank Name
Routing # of check:	/ Account #:

Pricing

**** $25 deposit to hold your child's spot**

We offer sibling discounts!

All Camps are 8am to 5pm

Camp discounts for our after school members

2020 DAY CAMPS $59

___ Jan 20th MLKing/No school Day Camp

___ Feb 17th Presidents' Day Camp

___ March 13th Record Day No School

SPRING BREAK CAMP

$169 week $59 day

___ March 16-20th Spring Break Camp

**We require a non refundable $25 deposit to hold your child's spot, (deposit will apply to your camp cost) There is No registration fee!

** Camp Shirt required for field trips

We are excited to have you in Camp! What to Wear!

**Shorts & T-Shirt Recommended for girls and boys

** Martial Arts Uniform -for formal classes

** For Circus Aerial Arts leggings , yoga pants or gi pants.

** We do lots of activities during camp and we burn lots of calories. Please PACK a big LUNCH with extra snacks everyday. They do get hungry during our camp. They will also need a refillable water bottle. (Please no soda, gum, candy or other junk food)

** I hereby authorize Bostock's Martial Arts, to deduct my payment _____ from my credit card / savings / checking account. My monthly or weekly payment from my account from the start of service thereafter through the end of service.

Please name printed:_____ signed name_____--Date: ____/____/____

**To cancel your payment, you must request to cancel your automatic payment at least three (10) business days prior to the scheduled payment date.

** I give myself/my child(ren)permission to attend Bostock's Martial Arts and Fitness and/or ride the bus, attend and participate in all activities, and I acknowledge that martial arts & circus arts are physical activities and can put strain on the body. I am not aware of any aliments that I/my child(ren) suffer from that would affect myself / my child(ren), the staff or third parties. The student/child(ren) and/or parent(s) hereby release and waive all claims against Bostock's Martial Arts and Fitness, Jab Inc, it's instructors, officers, employees and other students individual or otherwise from all claims including from any and all liability and responsibility in connection with such activities and hereby release all parties from liability by reason of accident or injury suffered by said child while engaged in such activities.
The student/child(ren) and/or parent(s) understands further that they must strictly obey and follow all and any safety rules set by Bostock's Martial Arts and Fitness.
From time to time we may have newspapers and television stations come interview, photograph or video tape our programs and I give my consent to same.

name printed:_____ signed name_____ _____date:_____