

Spring Break Camp 2015!

Welcome and thank you for choosing our 2015 Kids Capoeira Spring Break Camp! We have a full week of fun & excitement in store for your child! Your child will be busy learning *Capoeira*, a unique and powerful martial art, and so much more! In addition to learning Capoeira movements, acrobatics, musical instruments, songs in Portuguese, and Capoeira history, we will be taking field trips, doing arts projects, and playing fun games & activities all within our positive and nurturing environment.

Capoeira Activities:

- Movements and self-defense training
- Acrobatics Class: floor and trampoline
- Capoeira Music class: Your child will learn how to play three different instruments, learn songs in Portuguese, and learn a variety of rhythms.
- Capoeira and Brazilian history

Additional Activities:

- Arts & Crafts
- Team building activities
- Sports & games
- Reading / story time
- Fieldtrips

Camp Info

Camp Dates: Monday March 23rd – Friday March 27th

Camp Time: 9am – 4pm (**half days 9am – 12pm OR 1pm – 4pm)

1. FREE early drop off starting at **8:30am**
2. FREE lake pickup until **6:30pm**

Camp Fees:

1. New campers / non-members: \$139/wk or \$45/day
2. Discount for current CBP students: \$119/wk or \$30/day
3. Half Days: \$89/wk or \$35/day
4. Registration (new campers / non-members): \$29 (includes camp shirt)
5. Fieldtrips: \$12 (includes all fieldtrips)
6. Healthy Snack Program (2 healthy snacks per day): \$15

Camp Discounts

- \$20 Sibling Discount

Each Day, Students Must Bring:

- Lunch with two extra snacks
- Capoeira uniform or camp shirt
- Change of clothing
- Spray Sunscreen (no lotion)





SPRING BREAK CAMP 2015 - REGISTRATION FORM

Mother's Full Name Mother's Cell Phone E-Mail Address

Father's Full Name Father's Cell Phone E-Mail Address

Mailing Address City Zip Code

Home Phone Work Phone

Emergency Contact Name Relationship Phone

Name(s) of person authorized to pickup your child?

Do any of the children have medical conditions / allergies that we should be aware of?

How did you hear about us?

Students who may attend:

<u>Full Name</u>	<u>Date of Birth</u>	<u>Grade</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Which days will your child participate?

Parent drop-off time? _____ Parent pick up time? _____





Information & Policies

Payments: Full payment is due by Friday, March 20th. If payment is not received by the start of business on Monday, a \$15 late fee will be automatically applied. Please fill out the attached payment authorization form with your credit card information.

Declined Payment: Declined payments will result in a \$15 fee. There is a \$30 fee for every returned check.

Absence: Please contact us by 10am if your child will not be attending camp on a certain day.

Refunds: There are no refunds or prorated credits for missed sessions due to sickness, vacation, or any other reason. The registration fee is non-refundable. If you withdraw from camp, and you have authorized us to charge your card for your payment, your money will be refunded in the following manner: Two weeks (or more) prior to beginning camp: 75% refund. One week prior to camp: 50% refund. No refunds will be granted once camp has started.

Uniforms: Uniforms are required for all Capoeira classes. Students not wearing their full uniform may not be able to participate in class or other activities. While on fieldtrips, campers must be wearing their uniform shirt.

Lunch & Snack: Please pack a healthy lunch and snacks (2) to send with your child each day.

Fieldtrips: We offer fieldtrips as part of our spring break camp. Fieldtrip fees are not included in the tuition cost. The total costs of the field trips are \$15. Payment must be made by the start of camp.

Student Pickup: A person that has been designated, as an “authorized person” on registration form, must sign out the student out each day.

Pickup Time: Students may be picked up as late as 6:45pm at no additional cost. Students picked up later than 6:45pm will be charged \$10 per 15 minutes late.

Photo / Video: The parent/student understand and give permission to Capoeira Brazilian Pelourinho (referred to herein as CBP) to be photographed / video recorded and published or used in any lawful purpose. Capoeira Brazilian Pelourinho retains all rights of ownership to any video and photographs taken during classes, events, demonstrations, or any other activity in connection with Capoeira Brazilian Pelourinho.

Personal Belongings: CBP employees & volunteers shall not be responsible for damaged, lost or stolen articles, inside or outside the facility.

Discipline & Conduct: At all times, students must exhibit respect for themselves, respect for other students, respect for instructors, and respect for our facility. Parents are expected to support us in enforcing this policy.

Please, no video games / electronics!

I have read and agree to the following terms and confirm information provided is correct.

Name: _____ Signature: _____ Date: _____





Payment Authorization Form

Please complete and sign this form to authorize Capoeira Brazilian Pelourinho, Inc. to make a one-time charge to your Visa, MasterCard, or Discover card. By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated dates. Please note that any late or declined payment fee may change the amount of your schedule payment. If payment information changes, please notify us and update information immediately to avoid any declined payment fee or late charges.

Please complete the information below:

I _____ authorize Capoeira Brazilian Pelourinho, Inc. to charge my credit card
(full name)

account indicated below in the amount of: \$ _____ on _____ for the following,
services, fieldtrips, and/or goods: (total cost) (date)

(Description of items)

Billing Address _____

Phone# _____

City, State, Zip _____

Email _____

Account Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover
Cardholder Name _____
Account Number _____
Expiration Date _____
CVV2 (3 digit number on back of Visa/MC,) _____

I authorize Capoeira Brazilian Pelourinho, Inc. to charge the credit card indicated in this authorization form according to the terms outlined above. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

SIGNATURE _____

DATE _____





Travel Waiver

I have given _____, a student participating in Capoeira Brazilian Pelourinho classes, after school program, and/or summer camp permission to travel to and from the Capoeira Brazilian Pelourinho and participate in the field trips planned during as part of Capoeira Brazilian Pelourinho activities. I understand that, by signing this WAIVER, I am giving my express consent and permission for employees or persons designated by Capoeira Brazilian Pelourinho to transport my child to and from Capoeira Brazilian Pelourinho events and trips in Capoeira Brazilian Pelourinho-owned vehicles, leased vehicles or private vehicles.

I understand that transportation is being made available as a courtesy in order to ensure that my child has the opportunity to participate in the event, however, I am aware that my child is not required to accept the transportation being offered. I further understand and agree, for my child, and myself that neither the Capoeira Brazilian Pelourinho nor any of their directors, trustees, officers, employees, agent or volunteers shall have any liability for any injury or damage to my child's person or belongings, whether the result of negligence or any other cause, arising out of or relating to transportation of my child to or from events related to or sponsored by Capoeira Brazilian Pelourinho.

Printed Name: (guardian): _____

Signature (guardian): _____ Date: _____

Printed Name of Participant(s): _____





Liability Waiver

In consideration of being permitted to participate in any way in a Capoeira Brazilian Pelourinho classes, camps, workshops, fieldtrips, events & demonstrations, the participant or the parent(s) and/or legal guardian(s) (if participant is a minor) named below agree:

- 1) The participants, parent(s) and/or legal guardian(s) will prior to participating in the below martial arts activity or event, he or she should inspect the facilities and equipment to be used, and if he or she believes anything is unsafe, the participant should immediately advise the officials of such condition and refuse to participate. I understand and agree that, if at any time, I feel anything to be unsafe; I will immediately take all precautions to avoid the unsafe area and refuse to participate further. Adult participants will inspect their equipment in a like manner.
- 2) I/We fully understand and acknowledge that:
 - a. There are risks and dangers associated with participation in martial arts classes and other activities, which could result in bodily injury partial and/or total disability, paralysis and death. , I /We RELEASE and hold harmless, Capoeira Brazilian Pelourinho officers, instructors and assistants from all liability for my personal safety.
 - b. There may be other risks not known to us or are not reasonably foreseeable at this time.
- 3) I/WE accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis or death, however caused and whether caused in whole or in part by the negligence of the Releasees named below.
- 4) I/We HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE Capoeira Brazilian Pelourinho, its owners, their directors, instructors, assistants, the martial arts facility used by the participant, including it owners, managers, promoters, lessees of premises used to conduct the martial arts event or program, premises and event inspectors, underwriters, consultants and others who give recommendations, directions or instructions to engage in risk evaluation or loss control activities regarding the martial arts facility or events held at such facility and each of them, their directors, officers, agents, employees, all for the purpose herein referred to as "Releasee". From all liability to the undersigned, my/our personal representatives, assigns, executors, heirs and next to kin For any and all claims, demands, losses or damages and any claims or demands therefore on account of any injury, including but not limited to the death of the participant or damage to property, arising out of or relating to the events(s) caused alleged to be caused in whole or in part by the negligence of the releasee or otherwise.
- 5) EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the Province or State in which the event is conducted and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.
- 6) I give my consent for Capoeira Brazilian Pelourinho to act on my behalf to obtain emergency care and treatment if deemed necessary for my child or me.
- 7) I/we assume all risks and hazards incident to such participation including transportation to and from the activity; and I/we do hereby waive, release, absolve, indemnify and agree to hold harmless Capoeira Brazilian Pelourinho, the organizer, sponsors, supervisor, participants and person transporting my/our child(ren) to and from activities, from any claim arising out of injury to my/our child, whether the result of negligence or any other cause. I give permission for my child to attend field trips as scheduled by the Capoeira Brazilian Pelourinho with transportation provided through a third party or a Capoeira Brazilian Pelourinho vehicle.
- 8) I, the enrollee or the member, irrevocably authorize Capoeira Brazilian Pelourinho and those acting under it's authority, to copy, use, publish, advertising, trade, or any other lawful purpose whatsoever, photographic portraits, pictures or videotapes of me, in which I may be included in whole or in part.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT AND I FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY ANDVOLUNTARILY WFHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME ANDINTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Printed Name: (guardian if under 18): _____

Signature (guardian if under 18): _____ Date: _____

Printed Name of Participant: _____

Student DOB: _____

Phone: _____ Email: _____

