

ART ROCKS! SUMMER 2014 Registration Form

Parent/Guardian Name: _____
Student Name: _____ Date of Birth: _____ Age _____
Address: _____ City/State: _____ Zip: _____
Cell phone: _____ Home phone: _____
School: _____ Email: _____
Does your student have any allergies or special needs? NO Yes: _____

New Camp Location :

St. John Paul II School 87 South Main Street Middletown, CT 06457

Select Session(s) Options: _____ Half-Day AM 9:00 a-12:00 p | _____ Full Day 9:00 a -4:00 p

_____ June 16-20 **Art on the Farm**
OUTDOOR ADVENTURES: Riverview Farms

_____ July 21-25 **Art at the Staples**
OUTDOOR ADVENTURES: Rivendell Horse Farm

_____ June 23-27 **Art & Geography**
OUTDOOR ADVENTURES: Sleeping Giant Park

_____ July 28-Aug 1 **Art & Science**
OUTDOOR ADVENTURES: TBD

_____ July 30- July 3 **Art & Landscapes**
OUTDOOR ADVENTURES: Wadsworth Falls Park

_____ Aug 4-8 **Art & Recyclables**
OUTDOOR ADVENTURES: TBD

_____ July 7-11 **Art at the Zoo**
OUTDOOR ADVENTURES: Beardsley Zoo

_____ Aug 11-15 **Art Under the Sea**
OUTDOOR ADVENTURES: Mystic Aquarium

_____ July 14-18 **Art & The Mind**
OUTDOOR ADVENTURES: Yale Peabody Museum

Please Select :

_____ Qty T-Shirt(s) (\$10.00 each) Youth Size: _____ SM _____ Med _____ Large _____ XL
_____ My child will attend OUTDOOR ADVENTURE FIELD TRIPS \$35.00 /per session (optional)
_____ PM Mini Session 3:00 pm - 5:00 pm \$35.00 /per session

Registration Before April 15th (must be paid in full by April 15th)

_____ Half-Day Rate: \$85.00/per session _____ Full-Day Rate: \$105.00/per session

Registration After April 15th

_____ Half-Day Rate: \$105.00/per session _____ Full-Day Rate: \$165.00/per session

Parent Signature _____ **Date** _____

Register Online www.kidsartspace.org by Phone (860) 346-0898 or Mail payable to Kids Artspace
Mail: Kids Artspace, 955 S. Main Street, Middletown CT 06457 attn: ART ROCKS Summer