



SUMMER CAMP 2011

June 27 - September 2, 2011

Join us for summer camp at *Next Step Broadway*. Children will be dancing, singing, and acting their way to their own mini-musical performance. This performance will be presented on the last day of each session promptly at 4pm. They will be involved in every aspect of the production including, creating costumes and scenery. Some of the musicals from last year included Annie, Peter Pan, Mary Poppins and Wizard of Oz. There will be plenty of time to enjoy the sun at Hamilton Square Park across the street as well as downtime to nap or relax. Students also will be viewing and discussing different aspects of musicals during their relax time.

Campers meet Monday-Friday from 9:00am to 4:00pm with a late pick up option. All sessions are two weeks and include ages 4 & up. 35-40 spots are available for each session. Campers will receive a NSB hat to wear outside in the sun.

Please fill out the registration forms in full, provide immunizations and make the \$100 deposit to save your child's spot. Take a look at the camp checklist for everything your camper needs for the session.

PAYMENT

Camp tuition balance and immunization records are due no later than two weeks prior to the start of each session. A deposit of \$100 is required to hold a space for your child. All tuition can be paid by cash, credit card, or check payable to *Next Step Broadway*. Feel free to mail it to the above address or stop by the studio to make the payment in person. If your final payment is not received by the deadline, we will not be able to hold your child's space for that session.

All session changes must be done through the office. We realize that occasionally there may be a change in your schedule that conflicts with the session your child is registered. If you wish to switch your child's session we can accommodate only if there is available space.

Please note that all refund requests must be made in writing.

- A full refund will be issued with at least 2 weeks written notice prior to the start of session.
- A half refund will be issued with at least 1 week written notice prior to the start of session.
- No refund will be issued less than 1 week prior to the start of session.

CAMP CHECKLIST (You will need to provide these for your child daily)

- Sack lunch
- Snacks (at least 2 per day)
- Water bottle
- * Bathing suit
- Sunscreen (applied at home before camp)
- Towel
- Arrive in comfortable clothes to dance in (no dresses)
- * [No pillows/sleeping bags]



SUMMER CAMP 2011 REGISTRATION

June 27 - September 2, 2011

(A registration form must be completed for each child)

Child's Full Name: _____ Male Female

Date of Birth: _____ Age as of June 27, 2011: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Parent 1 Name: _____ Cell #: _____ Home #: _____

Parent 2 Name: _____ Cell #: _____ Home #: _____

Parent Email(s): _____

Emergency Contact: _____ Phone: _____

Other Authorized Adult(s) to pick up child from camp:

Name: _____ Relation: _____

Name: _____ Relation: _____

MEDICAL HISTORY

A COPY OF YOUR CHILD'S IMMUNIZATION RECORDS MUST BE SUBMITTED WITH THIS APPLICATION IN ORDER TO FULLY REGISTER.

Next Step Broadway is not responsible to distribute ANY form of medication.
No child will be permitted in camp if sick (cold/flu).

1) List any sicknesses, allergies (including nut allergies) or diseases your child has currently:

2) Is your child currently taking any medication? If so, please list:

3) List any physical activities your child cannot participate in:

4) Physician's Name: _____ Phone: _____



- Sessions are 2 weeks in length, Monday–Friday, ages 4 and up.
- 35-40 spots available per session (depending on age).
- * Session 1 has a reduced fee due to the July 4h Holiday (no camp held Monday, July 4th).
- Full payment is due 2 weeks before the start of the session.
- Multi-Session Discount: If attending 4 or 5 sessions, a \$100 discount on each 4th and 5th session.
- \$25 registration fee. (Registration fee waived for current NSB students).
- You will be notified by email after completed registration forms and deposit are received.
- Late pick up: 1 hour (4-5pm) - \$55/session.

Check session(s) and extended day hours you are interested in.	\$475/session 9am - 4pm (Session1: \$428)	Late Pick Up (1 hr) 4 - 5pm \$55/session		TOTAL
Session 1 June 27 - July 8 (No camp July 4 th)	<input type="checkbox"/> \$428 9am - 4pm	<input type="checkbox"/> \$55/session 4 - 5pm		\$
Session 2 July 11 - 22	<input type="checkbox"/> \$475 9am - 4pm	<input type="checkbox"/> \$55/session 4 - 5pm		\$
Session 3 July 25 - Aug 5	<input type="checkbox"/> \$475 9am - 4pm	<input type="checkbox"/> \$55/session 4 - 5pm		\$
Session 4 Aug 8 - 19	<input type="checkbox"/> \$475 9am - 4pm	<input type="checkbox"/> \$55/session 4 - 5pm		\$
Session 5 Aug 22 - Sept 2	<input type="checkbox"/> \$475 9am - 4pm	<input type="checkbox"/> \$55/session 4 - 5pm		\$
			REGISTRATON FEE (Non-Current Students)	<input type="checkbox"/> \$25
			TOTAL	\$
FOR OFFICE USE ONLY			DEPOSIT (\$100 per session)	\$ - ()
			MULTI-SESSION DISCOUNT	\$ - ()
			TOTAL LESS DEPOSIT & DISCOUNT	\$

CAMPER'S FULL NAME: _____



Waiver of Liability

I (hereinafter the word "I" shall mean to include the student/participant and any person executing this Waiver as a parent or legal guardian of the student/participant who may be waiving their rights on behalf of themselves and the student/participant) have voluntarily decided to participate in activities and events at, and use the facilities of, Next Step Broadway LLC, located at 233 9th St. Jersey City, NJ 07302.

I am voluntarily participating with the knowledge of the numerous risks and dangers involved, including, but not limited to: physical exertion for which I may not be prepared; hitting walls or falling down; breakdown of equipment, whether rented or owned; accident or illness; the risk of negligence by myself or others, including Next Step Broadway LLC; and the potential for serious injury, including permanent paralysis or death. I will follow all written and verbal rules of safety presented to me by Next Step Broadway LLC. I am responsible for my own welfare and accept any and all risks of unanticipated or anticipated events, illness, injury, emotional or physical trauma or death.

I hereby release, indemnify and hold harmless Next Step Broadway LLC, its owners, members, advisors, and all employees and agents of these parties from all liabilities, suits, claims and/or demands of any kind or nature, legal or financial, whether caused in any way by the negligence or not, arising from the participation in or observation of any Next Step Broadway LLC activity for injuries to any person or property, whether on or off the premises. I, on behalf of myself and the student/participant named below do hereby voluntarily participate in any and all Next Step Broadway LLC activities and that the student/participant and I understand that certain risks are inherent to and from participation and involvement with Next Step Broadway LLC and in its various formal and informal activities. These activities include but are not limited to dance and gymnastics. Next Step Broadway LLC is not responsible for any lost or stolen property, at any time. Anyone found to be violating any of the rules, codes of conduct, or found to be disruptive to either another individual or group may be asked to leave the premises or off-site location at any time and be refused reentrance without any full or partial refund.

I have read and understand the above Waiver of Liability and agree to these conditions. Initials: _____

Medical Release

In consideration for being allowed to participate in any way in the dance activities, which are understood, known and acknowledged to be physically strenuous and possibly dangerous activities, as well as to take part in training, practicing, competitions, demonstrations, and all related events and activities, I, the undersigned, on behalf of the student/participant acknowledge, appreciate and agree that I have consulted with a physician prior to entering into such activity and that:

I and the student/participant voluntarily assume full responsibility for any and all risk of bodily injury, death or property damage due to the negligence of Next Step Broadway LLC or otherwise, while in or on the premises, owned or controlled by Next Step Broadway LLC, and/or while competing, playing, practicing, officiating in, or working in any manner for the purpose of participating in the activities, or watching others on the premises, or playing any games on the premises; and the risk of injury from the activities involved is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist.

As the parent/legal guardian of the student/participant named below, I request and authorize that in my absence the student/participant named below be admitted to any hospital or medical facility for diagnosis and treatment. I request and authorize physicians, dentists, and staff, duly licensed as Doctors of Medicine/Osteopathy or Doctors of Dentistry or other such licensed technicians or nurses, to perform any diagnostic procedures, treatment procedures, operative procedures and x-ray treatment of the student/participant named below. I have not been given any guarantee as to the results of examination or treatment. I hereby authorize Next Step Broadway LLC, its owners, members, Board of Directors, and all employees and agents of these parties to act for the student/participant named below according to their best judgment in providing or arranging for emergency care in any emergency circumstance requiring medical attention. I authorize the hospital, medical or care facility to dispose of any specimen or tissue during the course of any diagnosis, treatment or other normal and customary procedures.

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 State of New Jersey and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect.

I have read and understand the above Medical Release and agree to these conditions. Initials: _____



Photo Release

I and the student/participant hereby understand and are fully aware that the student/participant named below may be participating in Next Step Broadway LLC activities in which I and/or the student/participant named below may be photographed or videotaped (the Property) from time to time. I hereby irrevocably grant to Next Step Broadway LLC perpetually, exclusively, and for all media throughout the world (including print, non theatrical, home video, CD-ROM, internet and any other electronic medium presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs, sound bites or video footage taken as a result of participation in Next Step Broadway LLC activities. I hereby agree that I will not bring or consent to others bringing claim or action against Next Step Broadway LLC on the grounds that anything contained in the Property, or in the advertising and publicity used in connection herewith, is defamatory, reflects adversely on me or the student/participant named below, violates any other right whatsoever, including, without limitation, rights of privacy and publicity. I hereby release Next Step Broadway LLC, its owners, members, and all employees and agents of these parties from and against any and all claims, demands, actions, causes of actions, suits, costs, expenses, liabilities, and damages whatsoever that I may hereafter have against Next Step Broadway LLC in connection with the Property. This agreement shall not obligate Next Step Broadway LLC to use the Property or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Property. Next Step Broadway LLC shall have the right to assign its rights hereunder, without my consent, in whole or in part, to any person, firm, corporation or organization.

I have read and understand the above Medical Release and agree to these conditions. Initials: _____

TERMS OF AGREEMENT

In signing this application, I believe that my child is qualified physically and mentally for camp. I agree to place my child in care of the staff, subject to all its rules and requirements.

In signing this application, I have agreed to the Waiver and Release, Medical Release, and Photo Release forms.

I give my permission for my child to take part in all camp activities including outdoor play in Hamilton Park. In the event that I cannot be reached in an emergency, I give permission to the physician or designated hospital selected by the camp staff to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child. I am aware that Next Step Broadway will not be responsible to dispense or administer ANY form of medication.

I understand that lunch is not provided, but a refrigerator is available for perishable foods.

Due to the seasonal nature of summer programming and the set limitation of spaces offered, no refund shall be provided for absences, changes, withdrawals, or dismissal for cause.

The Camp is not responsible for lost/damaged clothing or belongings.

For the safety and general welfare of all campers, instances of physical aggression and/or concern for safety of any camper(s) can lead to immediate termination of summer care. In addition, if parents are unwilling to follow camp rules or if the parent hinders the relationship between their child, his/her peers and/or teachers, the camp administration may determine that termination from the camp is a necessary course of action.

Parent/Legal Guardian Signature: _____

Parent/Legal Guardian (Print Name): _____

Child's Name (Print Name): _____

Date: _____

**PLEASE PROVIDE COMPLETED FORMS, IMMUNIZATIONS AND PAYMENT TO:
NEXT STEP BROADWAY, 233 9TH STREET, JERSEY CITY, NJ 07302**



CREDIT CARD AUTHORIZATION

* If you are not signed up for late pick-up with your registration, you will be charged \$20 for every ten minutes (or fraction thereof) you are late in picking up your child. Parents arriving after 4:00pm will be charged and a fee will be automatically deducted from your credit card at the end of the session. This fee also applies to the late pick-up option (5pm). This information will be secured and will not be used for any other purpose.

I, _____
(PRINT PARENT/GUARDIAN NAME)

understand and will comply with the late Pick-up Policy of Next Step Broadway Summer Camp 2011 and authorize Next Step Broadway to automatically charge my credit card \$20 for every ten minutes (or fraction thereof) I am late in picking up my child.

PARENT/GUARDIAN SIGNATURE DATE

CHILD'S NAME

Credit/Debit Card Information:

Card Type: _____ (American Express not accepted)

Credit Card Number: _____

Expiration Date (Month and Year): _____

Name as it appears on Credit Card or Debit Card (Print): _____

Cardholder's Billing Address (As listed with Credit Card or Debit Card Company):

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Cardholder's Signature: **Date:**