

TIGER J TKD CAMP SUMMER '24

JUL & AUG 2024 REGISTRATION FORM

1. PLEASE FILL OUT THE INFORMATION

Student's Name: _____ DOB: ___/___/___ Age: ___ Gender: M / F

Parent/Guardian(s): _____

Address: _____

Phone(s): _____

E-mail(s): _____

2. PLEASE SELECT THE DAYS

CHECK **ORANGE BOX** FOR EXTENDED HOURS FROM 3 TO 6PM **\$50 A DAY**

#	WEEKS	3 DAYS	4 DAYS	5 DAYS	DAYS					SUBTOTAL	PAID
		\$510	\$600	\$650	MON	TUE	WED	THU	FRI		FOR OFFICE
WK 1	7/08 - 7/12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	
WK 2	7/15 - 7/19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	
WK 3	7/22 - 7/26	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	
WK 4	7/29 - 8/02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	
WK 5	8/05 - 8/09	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	
WK 6	8/12 - 8/16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	
WK 7	8/19 - 8/23	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	
WK 8	8/26 - 8/30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	

TOTAL FOR WK 1-4: \$ _____

TOTAL FOR WK 5-8: \$ _____

TOTAL: \$ _____

3. FOR NON-TIGER J MEMBERS ONLY: DO YOU HAVE A TIGER J UNIFORM? Y N

IF ANSWERED **NO**, YOU NEED TO PURCHASE THE UNIFORM (**\$100**) IN ORDER TO PARTICIPATE IN TAEKWONDO CLASSES DURING THE CAMP.

4. PLEASE CONFIRM YOUR PAYMENTS FROM #2 AND #3: Y

5. CREDIT CARD INFORMATION:

CREDIT CARD #: _____ EXP. DATE: ___/___ CVV: _____

6. PAYMENT DUE DATES:

YOUR 1ST WEEK IS DUE **UPON REGISTRATION** / BALANCE FOR WK 1-4 IS DUE ON **7/1** / BALANCE FOR WK 5-8 IS DUE ON **8/1**

7. PLEASE READ: REGISTRATION & CANCELLATION POLICY

Spaces are limited and are reserved on a first come first served basis.

DUE TO LIMITED SPACE, NO FULL REFUND WILL BE GIVEN AFTER PAYMENT IS COMPLETE.

*All cancellation requests must be submitted at least 2 weeks prior to the week(s) being cancelled for a refund minus a **cancellation fee of \$50 per each week.**

**No cancellations or refunds will be processed past this point.

DUE TO LIMITED SPACE, MAKE-UP DAY IS NOT AVAILABLE IF YOU MISS YOUR SCHEDULED CAMP DAY.

8. PLEASE SIGN

Date: ___/___/___

Signature: _____