



Director: Jennifer Tutt (859) 245-5887

Spring Break Camps 2018 Week of April 2 Ages 2½ - 6 yrs. and 6 - 10 yrs.

Children will enjoy dancing, singing, storytelling, arts and crafts, games, playing instruments, supervised outdoor nature exploration, and musical theater activities.

Instruments being used include drums, bongos, tambourines, rattles, jingles, rhythm sticks, sand-blocks, the metallophone, glockenspiel, keyboards, pianos, and resonator bars.

Activities are education-based and promote musical, social, physical, emotional, and intellectual development.

Your child's personal snack from home will be served each day. If your child has specific food or environmental allergies or pertinent medical conditions, please list them on the registration form.

Please put sunscreen on your children before camp if the weather is warm, as we may go outside for some activities.

Location

121 Malabu Dr. #1 and #2
Lexington, Ky. 40503

Teaching Staff

Our staff is comprised of established professionals in the fields of music and education. They are trained *Musikgarten of Lexington* teachers and assistant teachers. Some teachers are also available for childcare before or after camp; please call for more information and pricing if you need to schedule this service.

(See other side for more information)

REGISTRATION FORM

Child's Name: _____ Age: _____

Parent's Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact: _____ Relationship: _____

Emergency Phone Number: _____

Medical conditions/allergies pertinent to camp: _____

Please fill out and return **both sides** of the registration form with your check, made payable to:
Musikgarten of Lexington or *MOL* at mailing address: 601 Deltino Ct., Lexington, KY 40515

**** Space will be filled on a first-come-first-served basis. Enroll early, as space is limited ****

Camp Dates: Monday, April 2- Friday, April 6

*** Friday we will have a fun performance with parents (at the end of camp)**

Camp Time: 9:30 - 12:00 (2.5 yrs. - 6 yrs.) Group A Music Camp

9:30 - 12:30 (6 yrs. -10 yrs.) Group B Piano Camp

Sample Curriculum: Actual curricula each day will vary, but will include these same basic elements.

Time	Activity
9:30	Parent drop-off
9:30 - 10:00	Arts/crafts and/or story time
10:00 - 10:30	Music
10:30 - 10:45	Potty break / Wash hands
10:45 - 11:00	Snack
11:00 - 11:30	Music
11:30 - 11:45	Variety of story telling / musical theater / creative dance / nature study
11:45 - 12:00	Finish art work and parent pick-up

Sign up for:

___ **Group A (2.5 yrs. to 6 yrs.)**
___ **Group B (6 yrs. to 10 yrs.)**

Children's Musikgarten T-shirt
Sizes: XS (2-4) S (6-8) M (8-10)
Order: XS ____, S ____, M ____
Price: \$ 16 each

Tuition: Group A = \$130 per child

Group B = \$160 per child

Total = \$ _____

◆ **Our high-quality Musikgarten CD's and instruments are available for purchase.**

I/We as the parents/guardians of _____ do hereby release, waive and discharge *Musikgarten of Lexington, Inc. ("MOL")* its employees, servants and agents, and the Malabu-Brookhaven Condo Assoc., from all liability for any and all loss or damage, and any claim or demands therefore on account of injury to the child, parent/guardian or property which may arise out of or be related to any scheduled activity of *MOL*.

The information contained in this registration/medical release form is true and accurate to the best of parent/guardian's knowledge and belief. By signing below, the parent/guardian authorizes the release of this information to medical personnel for emergency situations involving the above named child and his/her parent/guardian. In any medical emergency, the parent/guardian hereby authorizes *MOL*, its employees, servants and agents, to admit, on behalf of the parent/guardian above-named child to a hospital for medical treatment. The parent/guardian hereby assumes responsibility for all costs and fees incurred for such medical treatment, and shall further hold harmless *MOL*, its employees, servants and agents, and the Malabu-Brookhaven Condo Assoc., from any and all loss, liability, damage, or costs that may be incurred arising out of or related to such medical services.

I/We also understand that registration, tuition, and all other fees paid to *MOL* are non-refundable and non-transferable except in the case of extreme illness or an out-of-state move for which *MOL* must be notified in advance of the scheduled date(s).

Date: _____ Signature of Parent/Guardian: _____