

# COACH MARTY'S ALL STAR CAMPS

Application form for Summer 2021

**\$225.00 per session**

**Monday through Friday 9AM through 4PM**

At:

**Xtreme Action Park**

**5300 Powerline Road – Ft Lauderdale, FL**

\_\_\_\_ June 14 – June 18

\_\_\_\_ July 12 – July 16

\_\_\_\_ June 21 – June 25

\_\_\_\_ July 19 – July 23

\_\_\_\_ June 28 – July 2

\_\_\_\_ August 2 – August 6

\_\_\_\_ July 5 – July 9

\_\_\_\_ August 9 – August 13

**(no camp July 26 – July 30)**

\_\_\_\_ Activity Cards \$25 (2 hours game room & 1 hour roller skating) indicate quantity

\_\_\_\_ After Care \$25 daily 4pm-6pm (includes 2 hours game room) indicate quantity

Name: \_\_\_\_\_ Gender: M/F \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade (as of 09/18): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Payment Method: Amount \_\_\_\_\_ . Check . \_\_\_\_\_ Credit Card \_\_\_\_\_

Amount Paid - \_\_\_\_\_ Tuition \_\_\_\_\_ Lunch/Canteen \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_\_ CVV \_\_\_\_\_

Medical Insurance Company: \_\_\_\_\_ Policy # \_\_\_\_\_

Parent Name: \_\_\_\_\_ Referred by: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ E-Mail: \_\_\_\_\_

(AUTHORIZES ENROLLMENT AND TREATMENT IN CASE OF EMERGENCY)

A \$50 deposit (per week) is due immediately to guarantee your reservation. Please call for additional discounts.

**Return this form along with deposit to:**

Coach Marty's All Star Camp • 3032 E. Commercial Blvd. #117 • Ft Lauderdale, FL 33308

EMAIL: MARTYSCAMPS@GMAIL.COM • www.martyscamps.com

Tel 954 -513-9666 • Fax 954-693-0684