



LACOMBE PERFORMING ARTS CENTRE

SUMMER CAMPS 2024 Registration

Week(s) Requested: July 8-12 July 15-19 July 22-26
 July 29-August 2 August 12-16 August 19-23

Child's Name: _____ Date of Birth: _____

Address: _____

City: _____ Postal Code: _____

T-shirt size (indicate youth or adult): _____

Parent/Guardian Name: _____ Cell Phone: _____

Home/Work Phone: _____ Email: _____

Emergency Contact 1:

Name: _____ Phone: _____

Emergency Contact 2:

Name: _____ Phone: _____

Any allergies, medical concerns, limitations, special needs we need to be aware of:


By signing, you agree to all terms and conditions (on second page).

Parent/Guardian Signature

Parent/Guardian Name (Print)

For office use:

Payment Method: CHQ CASH CREDIT/DEBIT
Date Registration Received:



By submitting this form, the applicant and his/her guardian understand and accept the following terms and conditions of the Lacombe Performing Arts Centre (LPAC) herein provided:

1. Parents must be aware that camp will be on a first come first served basis.
2. The payment enrolls the camper to the selected period of the camp program.
3. Withdrawal of enrollment prior the start of the camp shall deduct 20% from the full amount provided to be returned to the child or guardian.
4. Should the child withdraw anytime within the period of the scheduled camp which the child enrolled; he/she shall not receive any refund.
5. All medical conditions of the child must be stated on the application form in a concise and clear manner.
7. The child should be properly prepared for the weather, dressing in layers for the cool morning, dressing in clothing acceptable to be outdoors and for art.
8. Any activity outside or not part of LPAC's program shall not hold LPAC's employees responsible for anything that might happen to the campers.
9. LPAC shall not accept responsibility for the loss or damage to any property belonging to the children.
10. LPAC reserves the right to cancel part of/or the entire program.
13. LPAC's staff may take photos or videos while in the camp's activities and may use such photos or videos for promotional purposes. However, if you do not wish images of your camper to be used by us. Please inform us anytime.
14. The guardian authorizes LPAC to seek medical treatment in the event of an accident or sickness. It is likewise the LPAC's responsibility to inform the parents/guardians of the child in case such event arises at the earliest time possible for LPAC's staff.
15. The schedule of activities are subject to change depending on weather conditions, program schedule and other arrangements by which LPAC reserves the right to cancel, amend or alter activities accordingly in the event of unanticipated situations.