

Facets Kids Film Camp APPLICATION

Session 1: June 20 – July 1, 2011 (Ages 11-14, 9am-12:30pm & Ages 7-10, 2pm-5:30pm) – Half Day

Session 2: July 11 – July 15, 2011 (Ages 11-14 only) – Full Day

Session 3: July 18 – July 22, 2011 (Ages 7-10 only) – Full Day

APPLICATION FORM

Participant's Name: _____ Age (as of 7/22/11): _____ Birth Date: _____

Parent or Guardian Name: _____

Address: _____

City/State/Zip: _____

Telephone #: (home) _____ (cel) _____ (work) _____

Parent/Guardian E-mail: _____

Emergency Contact (other than yourself: name, number, relationship): _____

How did you hear about Facets Kids Film Camp?: _____

PAYMENT INFORMATION

Please check the session of participation:

Session 1 (June 20-July 1): _____ Session 2 (July 11-15): _____ Session 3 (July 18-22) _____

- **Session 1:** Ages 11-14 meet 9am-12:30pm and ages 7-10 meet from 2pm-5:30pm. Cost is \$350
- **Session 2:** Ages 11-14 only. Session meets from 9am-5pm. Cost is \$450 with lunch provided.
- **Session 3:** Ages 7-10 only. Session meets from 9am-5pm. Cost is \$450 with lunch provided.

Check one:

Session 1: _____ \$350 (snack provided) _____ \$315 Patron Circle Member/Sibling (snack provided)

Session 2 & 3: _____ \$450 (snack & lunch provided) _____ \$405 Patron Circle Member/Sibling (snack & lunch provided)

_____ Check enclosed. Please make checks payable to "Facets".

Credit Card Number: _____

Cardholder Signature: _____ Expiration date (mo/yr): _____ / _____

OTHER DETAILS

CHILDREN'S JURY: Would your child be available to participate in the **Children's Jury** (August 1-5 & August 8-12, 2011) of the Chicago International Children's Film Festival _____ Yes _____ No

VOLUNTEERING: Would you be interested in volunteering for Facets Kids Film Camp? _____ Yes _____ No

PARTICIPATION AGREEMENT: I hereby give my child permission to participate in programs of Facets Multi-Media. My child will follow program rules or risk dismissal from the program.

Signature of parent/guardian: _____ (Date): _____

Name of parent/guardian (please print): _____

Please send application materials to:

Facets Kids Film Camp, c/o Facets, 1517 W. Fullerton Ave., Chicago, IL 60614

Tel: 773-281-9075 ext. 3011 Fax: 773-929-0266 kidsfest@facets.org www.cicff.org