



## ICC Summer Camp 09

To Register for ICC Summer Camp please mail registration form before May 15, 2009

**Mail to:** ICC Summer Camp 2009  
4304 Harborwatch Lane  
Lutz, FL 33558-9704

**Online:** [www.tampaicc.com](http://www.tampaicc.com).

*Camp registration is finalized once payment is processed. Discounts are applied during the processing of payments.*

**Payment\*** Check: Payable to: India Cultural Center

### FOR INFORMATION, CALL

Dhruti Parikshak (813) 505-9962      Hema Adhia (813) 391-6658  
Gira Patel (813) 495-2312      Namrata Amin (727) 251-1366

### REGISTRATION

- Summer Camp registrations will not be taken over the phone.
- Register early to ensure admission into your desired camps.
- Complete one form per child. Additional forms available online.
- Choose camps based on age or grade completed as of June 8, 2009.
- Complete the registration form fully. Keep a copy for your records.
- Confirmation of camp registration and program information will be sent in 2 weeks. Please review the camp registration information and note the start dates for each camp. Refunds will not be issued for missed camps.
- Camp fees include all program fees, supplies, admission, and one T-shirt per camper per week registered.
- Multiple week discounts are available.

### ICC SCHOLARSHIP

- Scholarships are available for those who need financial assistance.
- Scholarship awards for on-site camps are based on family income, student interest, and student merit. Written proof of financial need is required.
- Scholarship applications are available at ICC

### OTHER CAMP INFORMATION

- Each class is designed for the skill and social aspects of a particular age group. Please observe the age and grade categories.
- Program capacities are subject to change.
- A \$5 fee will be charged for each change made to the original registration.

### DROP OFF & PICK UP

- Children may be signed in 15 minutes before the start of the program and must be signed out no more than 15 minutes after the end of the program.
- Children are not to be left unattended.
- A fee of \$1 per minute is charged for late pick up

### CANCELLATION & REFUND POLICY

ICC reserves the right to combine or cancel classes that have not met the minimum enrollment. Campers will be placed in an alternative class when possible. If ICC cancels a class, payment will be fully refunded. For special circumstances, a 75% credit or refund will be granted for written requests made 14 or more days before the first day of the camp session. A 50% credit or refund will be granted for written requests made 13 or fewer days prior to the first day of the camp session. No refunds will be granted on or after the first day of the camp session. Contact the ICC Summer Camp Volunteers listed above. All requests must be in writing and sent to: ICC Summer Camp 2009, 4304 Harborwatch Lane, Lutz, FL 33558-9704

*\*All registrations subject to camp availability.*

All Classes held  
at India Cultural Center  
**5511 Lynn Road Tampa, Florida 33624**



## ICC Summer Camp 09

**A Student Name** \_\_\_\_\_

Birthdate \_\_\_\_\_

School Attending \_\_\_\_\_

Entering Grade \_\_\_\_\_ in Fall 2009

I/we, the undersigned parent(s) of the minor child named above, hereby grant permission for my/our child to participate in all activities in and around ICC. In addition, I/we hereby grant permission for my/our child to participate in all field trips which may include travel, walking through wooded areas, wading or swimming, and other activities, including, but not limited to those activities included in the program description. Further, I/we agree to assume all risks and liabilities associated with my/our child's participation in said program(s) and to hold ICC harmless from all claims which may arise as a result of such participation. In case of emergency, ICC has permission to take my child to the nearest hospital.

**Parent/Guardian Signature** \_\_\_\_\_

Date \_\_\_\_\_

**B Parent/Guardian's Name** \_\_\_\_\_

Address \_\_\_\_\_

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

Day Phone ( ) \_\_\_\_\_ Evening Phone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_ Email \_\_\_\_\_

Place of Work \_\_\_\_\_

### Emergency Contact in Summer:

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_ Phone \_\_\_\_\_

If your child has a condition that needs special attention, please advise (*include allergies and medication*):

### Mail Completed Registration Forms to:

ICC Summer Camp 2009  
4304 Harborwatch Lane  
Lutz, FL 33558-9704

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**Student's Name:** \_\_\_\_\_

## C Camp Selections Check here for

Use the "Schedule-at-a-Glance" pages to help complete this form **Lunch Supervision**

Camp Title	Week	Time	FEE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**CAMP FEE SUBTOTAL \$** \_\_\_\_\_

## Sibling / Multiple Camp Discount

Determine the number of camp that the camper is registered for ICC Summer Camp. Determine the number of camps that siblings are registered for ICC Summer Camp. Add the number of camps together and determine final discount. Sibling registration forms must be submitted at the same time to qualify for Multiple camp discounts. Take 10% Off 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> camp. Only one discount at a time please. I

Total Camp Fees \$ \_\_\_\_\_ x \_\_\_\_\_ % = Minus Multiple Week Discount - \$ \_\_\_\_\_

## ICC Membership Discount

### Member Status:

\_\_\_\_\_ I am a ICC member / Name on Membership \_\_\_\_\_

\_\_\_\_\_ I am not a ICC member

\_\_\_\_\_ I am joining/renewing ICC membership at this time. (Attach membership application.)

Determine the number of camp that the camper. If you are a member of ICC take

Total Camp Fees \$ \_\_\_\_\_ x 10% = Minus Membership Discount - \$ \_\_\_\_\_

**CAMP FEE TOTAL \$** \_\_\_\_\_

## D LUNCH

The ICC offers a variety of lunch cooked by our "Cooking at Campus" students. Lunch choices each day varies. All lunch cooked at ICC Camps are Vegetarian.

**IF Campers have any special need meal or dietary allergies we recommend those Campers provide their own lunch.**

Circle Week(s) 1 2 Number of weeks \_\_\_\_\_ x \$25.00 per week = \$ \_\_\_\_\_

**LUNCH TOTAL \$** \_\_\_\_\_

## E REGISTRATION FEE

**\$ 20.00**

**TOTAL FEES ENCLOSED \$** \_\_\_\_\_

(add together totals from Sections C, D, and E)  
Make Check Payable to: India Cultural Center

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