

## 2018 SUMMER ART CAMP SCHEDULE



Celebrating 11 Summers of Just Giggling!  
((Now offering morning and afternoon camp sessions!))

Each Session : \$200 ((Includes all Supplies)) Each Additional Sibling : \$185

Each Session is Different – Save \$10 per Session if you register for multiple weeks

Please send a small snack or lunch as we will take a 15 minute break each day

((every session invites all ages!))

Session#1 ((4 hours/4 days))  
May 29 – June 1  
Morning Session : 10am – 2pm  
Afternoon Session : No afternoon session week #1

Session#2 ((3 hours/5 days))  
June 4 – June 8  
Morning Session : 10am-1pm  
Afternoon Session : 2pm-5pm

Session#3 ((3 hours/5 days))  
June 11 – June 15  
Morning Session : 10am-1pm  
Afternoon Session : 2pm-5pm

Session#4 ((3 hours/5 days))  
June 18 – June 22  
Morning Session : 10am-1pm  
Afternoon Session : 2pm-5pm

Session#5 ((3 hours/5 days))  
June 25– June 29  
Morning Session : 10am-1pm  
Afternoon Session : 2pm-5pm

Session#6 ((3 hours/ days))  
July 2 – July 6  
Morning Session : 10am – 1pm  
Afternoon Session: No Afternoon session week#6

Session#7 ((3 hours/ 5 days))  
July 9 – July 13  
Morning Session : 10am-1pm  
Afternoon Session : No afternoon session week#7

Session#8 ((3 hours/ 5 days))  
July 16 – July 20  
Morning Session : 10am-1pm  
Afternoon Session: No afternoon session week#8

Session#9 ((3 hours/5 days))  
July 23 – July 27  
Morning Session: 10am-1pm  
Afternoon Session: 2pm-5pm

Session#10 ((3 hours/5 days))  
July 30 – August 3  
Morning Session : 10am – 1 pm  
Afternoon Session : 2pm – 5pm

CAMPERS NAME \_\_\_\_\_ YOUTH TSHIRT SIZE ((S.M.L.XL)) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CHILDS AGE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

PARENT/GUARDIAN FULL NAME \_\_\_\_\_

CELL PHONE# \_\_\_\_\_ HOME PHONE# \_\_\_\_\_ WORK PHONE# \_\_\_\_\_

EMAIL \_\_\_\_\_

EMERGENCY CONTACT(S) \_\_\_\_\_

LIST ANY MEDICAL CONDITIONS. ALLERGIES \_\_\_\_\_

I/WE, the above participant(s), and parent(s)/guardian(s), do hereby consent to my child, \_\_\_\_\_, to participate in the above program((page1 Just for Giggles 2018 Summer Camp)), including all activities. I/WE assume all responsibilities for, and risks and hazards of participation in the named program. I/WE understand that NO REFUNDS will be issued. Just for Giggles reserves the right to showcase your child or you by using any classroom artwork or photographs in future promotions or displays.

SIGNATURE OF PARENT/GUARDIAN(S) \_\_\_\_\_

DATE \_\_\_\_\_

DUES\$ \_\_\_\_\_

FEEL FREE TO EMAIL OR SEND FORM TO:

JUST FOR GIGGLES  
12635 CRABAPPLE ROAD SUITE 250  
MILTON,GA 30004

W:WWW.JUST-FOR-GIGGLES.COM

T: 770.664.0555

E:CONTACTUS@JUST-FOR-GIGGLES.COM

METHOD OF PAYMENT : An invoice will be sent by email with a link to pay online once registration form is received!  
Checks can be sent to the address above!