

## STUDYALONG CAMP REGISTRATION INFORMATION

### REGISTRATION

You can register for courses at the camp by completing the registration form and contacting us via phone, mail, e-mail, or online. The registration form is available for download at our website.

### PAYMENT

We accept cash, a personal check, or debit/credit card, Visa and Master card only. If you write a check, please make it payable to *Baeier Group, Inc.* A full payment for courses at the time of registration is needed to ensure your child's enrollment. A returned check will be charged a \$35 fee.

### BEFORE AND AFTER CARE PROGRAM

We provide the extended care program for elementary and middle school students. If you sign up for the extended care program, you must register for a before-and-after care program separately for each session at a time.

### FOOD

A child must bring his or her own lunch and snack that do not require refrigeration. There is no cafeteria or food court on the campuses where a child can buy food.

### HOLIDAYS AND CLOSING

The camp is closed on July 4. The camp will be open all other days unless an emergency situation occurs. In the event of an emergency or unforeseen event, we will put up an announcement at our web site and try to contact a child's parent or guardian. In such case, you must pick up your child as soon as possible.

### INDEMNITY

I agree to defend, indemnify, and hold harmless Baeier Group, Inc. and StudyAlong Camp (hereafter "Camp"), its officers, board members, employees, attorneys, and agents ("Indemnitees") against all claims, expenses, liabilities, losses, costs, and damages, including

but not limited to personal injury, property damage, court costs, and reasonable attorney's fees, however caused, even if caused by the negligence of Indemnitees as a result of my child's participation in the camp.

### DISMISSAL AND TERMINATION

I further agree that the officers, agents, employees of Camp reserve the right to dismiss a child for failure to follow the instructions and directions of its instructors, employees, and officers, or for any acts of conduct deemed by the officers or employees of Camp to be detrimental to or incompatible with the interest, harmony or welfare of the camp. No refund shall be issued if a child is dismissed from the camp.

### USE OF CHILD'S WORKS, PHOTOS, VIDEOS AND FEEDBACK

I grant Camp a nonexclusive, royalty-free, perpetual, irrevocable right to reproduce, use, publish, distribute, and display my child's works, photos, videos, and feedback taken during child's participation in the camp in whole or a part in all forms and media for the purpose of promoting and advertising Camp.

### LOSS, DAMAGE, AND THEFT OF PERSONAL PROPERTY

Camp will not be responsible in any way for the loss, damage, or theft of child's personal property brought to camp even if it is required for a class.

### EMERGENCY MEDICAL TREATMENT CONSENT

In the event of my child's emergency medical situation, I authorize the officers and employees of Camp to transport my child for emergency medical treatment. Further, I authorize a licensed physician, a healthcare provider, or person who is taking care of my child to give medication and/or perform necessary medical procedures to preserve the life and well-being of my child. I agree that I will be financially fully responsible for all the cost and expenses incurred from and related to

my child's medical treatment.

### DROP-OFF AND PICK-UP POLICY

If you are going to use the extended care program for your child, you must register for each session separately.

If you sign up for a before-care program, you can drop your child off at 7:30 AM at the camp location. For those who sign up for an after-care program, you must pick up your child by 5:30 PM. For all others, you must pick up your child from the drop-off location no later than 12:15 PM and 4:15 PM, respectively, after a half- and full-day program. There is a late pick up fee of \$1 per minute past the pick-up times. In the event that someone other than yourself must pick-up your child, you must notify us at least two hours before the pick-up time otherwise we cannot release a child from the camp and the late pick-up fee will be assessed.

### REFUND AND CANCELLATION POLICY

We will gladly refund you a full tuition minus the nonrefundable deposit of \$100 per child per course per session and the extended care fee minus \$50 per session if you write to us a refund request via e-mail by May 31. After that date, we do not issue any refund for any reason.

We reserve the right to cancel any courses due to lack of enrollment without any notice. We also reserve the right to cancel camps or courses for reasons including, but not limited to inclement weather, natural disasters, terrorist acts, a war, and other unforeseen circumstances. In the event of cancellation of a camp or course due to lack of enrollment, a full refund will be issued. However, we will not issue a refund for cancellation of camps or courses due to unforeseen circumstances.

### CONTACT INFORMATION

Our address is at 5900 Fort Dr. #307, Centreville, 20120. Tel.: 703-314-9881, E-Mail: [info@studyalongcamp.com](mailto:info@studyalongcamp.com).

## SCHEDULE AT THE FAIRFAX CAMPUS

SESSION I (6/26/2017-7/7/2017) @ST. ANTHONY ACADEMY*			
Grade (3-4)	Grade (5-6)	Grade (7-8)	Grade (9-12)
8:30 AM – 12:00 PM			
Fundamental Writing	Robotic Explorations Pre-Algebra	Pre-Algebra	Writing Foundations SAT Math
12:30 PM – 4:00 PM			
Fundamental Math Animation Programming	Beginning Debate	Middle School Writing Geometry	Geometry SAT Writing
4:00 PM - 7:00 PM			
			Honors Chemistry Honors Biology College Application Essays*

SESSION II (7/10/2017-7/21/2017) @ST. ANTHONY ACADEMY			
Grade (3-4)	Grade (5-6)	Grade (7-8)	Grade (9-12)
8:30 AM – 12:00 PM			
Speech & Presentation	Concrete Math Introduction to Android Programming	Expository Writing	Algebra 2 SAT and ACT Critical Reading
12:30 PM – 4:00 PM			
Robotic Adventures	Concrete Writing	Algebra 1	Argumentative Writing SAT Math
4:00 PM - 7:00 PM			
			AP Calculus A (Differential Calculus) AP Biology I College Application Essays

SESSION III (7/24/2017-8/4/2017) @ST. ANTHONY ACADEMY			
Grade (3-4)	Grade (5-6)	Grade (7-8)	Grade (9-12)
8:30 AM – 12:00 PM			
Math in Actions	Persuasive Writing	Programming Concepts	Trigonometry(PreCalculus) SAT/ACT Writing
12:30 PM – 4:00 PM			
Reading and Writing Short Stories	Math Challenges*	TJ Admissions Test Prep.	Intro. Java Programming SAT/ACT Critical Reading
4:00 PM - 7:00 PM			
			AP Chemistry I AP Physics (Mechanics) College Application Essays

SESSION IV (8/7/2017-8/18/2017) @ST. ANTHONY ACADEMY			
Grade (3-4)	Grade (5-6)	Grade (7-8)	Grade (9-12)
8:30 AM – 12:00 PM			
Fundamental Writing	Concrete Math Introduction to Android Programming	Argumentative Writing	Algebra 2 SAT/ACT Critical Reading
12:30 PM – 4:00 PM			
Fundamental Math Robotic Discovery	Concrete Writing	Algebra 1	Writing Foundation SAT Math
12:30 PM – 4:00 PM			
			AP Calculus B (Integral Calculus) AP Chemistry College Application Essays

# STUDYALONG CAMP REGISTRATION

## SITE REGISTRATION

*This is for login to the site and use of our site.*

USER ID: \_\_\_\_\_ PASSWORD: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

### HOW DID YOU HEAR ABOUT US?

- ATTENDED CAMP BEFORE       FLYER       ONLINE SEARCH/AD  
 FRIENDS/FAMILY       NEWSPAPER       OTHER

### PARENT INFORMATION

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/TOWN: \_\_\_\_\_ STATE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

### CHILD INFORMATION

*You must fill-out a separate registration form for each child.*

GENDER:     M     F

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

GRADE (FALL): \_\_\_\_\_ SCHOOL: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

STUDENT E-MAIL: \_\_\_\_\_

*If a sibling(s) is also going to attend our camps, please write all their names.*

1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_ 4. \_\_\_\_\_

### EMERGENCY CONTACT

	NAME	RELATIONSHIP	PHONE NUMBER
1.	_____	_____	_____
2.	_____	_____	_____

### IMPORTANT MEDICAL INFORMATION WE SHOULD KNOW ABOUT

*(e.g., seizures, heart disease, diabetes, asthma, food, medication, or chemicals allergies)*

\_\_\_\_\_  
\_\_\_\_\_

DOES THE CHILD TAKE ANY MEDICATION?     YES     NO

IF "YES", PLEASE LIST THE MEDICATION

\_\_\_\_\_  
\_\_\_\_\_

# STUDYALONG CAMP REGISTRATION

## INSURANCE INFORMATION

INSURANCE COMPANY: \_\_\_\_\_

NAME OF A POLICY HOLDER: \_\_\_\_\_ POLICY NUMBER: \_\_\_\_\_

## COURSES

Locations	Sessions	Time	Grade	Course	Fees

TOTAL: \_\_\_\_\_

5% EARLY REGISTRATION BY MARCH 15 OR SIBLING DISCOUNT\*: \_\_\_\_\_

*I have read and agreed to all terms and conditions of the camp.*

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE:

\_\_\_\_\_  
DATE: