

mocha

summer art camp registration

child name	age
child name	age
parent/guardian name	
daytime phone number	
e-mail	
address	
city	state zip

	ART CAMP	STUDIO CAMP	price	qty	total
6/11-15	<input type="checkbox"/> Jurassic Art	<input type="checkbox"/> Cartooning 101	\$275	x	__ =
6/18-22	<input type="checkbox"/> Adventures in Architecture	<input type="checkbox"/> Cont. Cartooning	\$275	x	__ =
6/25-29	<input type="checkbox"/> Art of the Realm	<input type="checkbox"/> Craft Design	\$275	x	__ =
7/2-6	<input type="checkbox"/> Food Fantasies	<input type="checkbox"/> Wearable Art	\$238	x	__ =
7/9-13	<input type="checkbox"/> Lost in Space	<input type="checkbox"/> Sculpture	\$275	x	__ =
7/16-20	<input type="checkbox"/> Animal Instincts	<input type="checkbox"/> Drawing	\$275	x	__ =
7/23-27	<input type="checkbox"/> Supersize Me	<input type="checkbox"/> Painting	\$275	x	__ =
7/30-8/3	<input type="checkbox"/> Island Getaway	<input type="checkbox"/> Adv. Cartooning	\$275	x	__ =
8/6-10	<input type="checkbox"/> Monster Madness	<input type="checkbox"/> Printmaking	\$275	x	__ =
8/13-17	<input type="checkbox"/> Puppet Pals	<input type="checkbox"/> Architecture	\$275	x	__ =
8/20-24	<input type="checkbox"/> In Disguise		\$275	x	__ =
		early registration discount	\$10	x	__ = -
				camps sub-total	<input type="text"/>

	m	t	w	th	f	price	qty	total
precare (8-8:30am)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$3	x	=
aftercare (3:30-5pm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$6	x	=
latecare (5-6pm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$12	x	=
								child care sub-total
								<input type="text"/>
								10% discount for members/multi-child registration
								- <input type="text"/>

MEMBERSHIP	price	total
new/renewal	\$60	_____
student/educator	\$40	_____
donation to scholarship fund	\$100	_____
	grand total	<input type="text"/>

PAYMENT INFORMATION

cash check or money order payable to MOCHA credit card
 circle one: AMEX DISC MC VISA

cardholder name	
account number	
expiration date	3-digit security code

Registration forms maybe mailed or hand-delivered with payment to:
 MOCHA Registrar, Museum of Children's Art, 538 Ninth St., Ste. 210, Oakland, CA 94607
 510.465.8770 x308 • fax 510.465.0772 • www.mocha.org