**Solar Productions Afterschool Program**

632 Broadway, Ste 304, NY, NY 10012 212.473.3040 http://solarproductions.wixsite.com/filmmakingsummercamp/

YOUR CHILD IS NOT GUARANTEED PLACEMENT IN THE SESSION

UNTIL YOU RECEIVE OFFICIAL CONFIRMATION VIA EMAIL.

If the session you request is full, you may request placement in another session OR withdraw your application without penalty.

Solar Productions reserves the right to cancel a session up to 5 days

prior to start date with discretion in case of a weather emergency. In the

event of cancellation by Solar Productions, tuition will be refunded.

September 10 – December 19

Tuesdays & Thursdays, 4:00 P.M. - 5:30 P.M.

DUE TWO (2) WEEKS PRIOR TO SESSION

$1,450 - Tuesdays & Thursdays (29 sessions)

$750 - Tuesdays Only (15 sessions)

$700 - Thursdays Only (14 sessions)

• Open to ages 13 – 18 • Tuition includes all supplies • Limited Admission

• Participants are welcome to bring a snack and water bottle each day

• Housing is not provided

**Instructions**

**Schedule**

**Tuition**

**Additional Information**

**SUBMITTING COMPLETED APPLICATIONS**

Mail To or Drop Off At: Solar Film/Video Productions, 632 Broadway, Suite 304, NY, NY 10012

Email To: [workshops@solarnyc.com](mailto:workshops@solarnyc.com)

**PAYING TUITION**

Send a check by mail, pay cash/check at our office OR Pay via Paypal (please add $35 service fee) to [workshops@solarnyc.com](mailto:workshops@solarnyc.com) (please do NOT use e-check)

**QUESTIONS**

Email: [workshops@solarnyc.com](mailto:workshops@solarnyc.com)

Call: (212) 473-3040

**Application** Please fill out a separate form for each participant

Participant’s First/Middle/Last Name Age Phone #

Home Address Email Address

Parent/Legal Guardian Name Phone # Email Address

Parent/Guardian Name Phone # Email Address

Emergency Contact Phone #

Health Conditions and/or Allergies Additional Information

**Please briefly explain participant’s interests in and/or experience with filmmaking:**

**Choose A Session:**

* Tuesdays & Thursdays (30 classes), September 10 – December 19
* Tuesdays (15 classes), September 10 – December 17
* Thursdays (14 classes), September 12 – December 19

**Liability Release**

In consideration of the acceptance of my application for the above program, I hereby waive, release, and discharge any and all claims for damages for personal injury, property damages or which may hereafter occur to me as a result of participation in said event. This release is intended to discharge in advance Solar Films and its employees from liability, even though that liability may arise out of perceived negligence on the part of persons mentioned above.

It is understood that some recreational activities involve an element of risk or danger of accidents. I hereby assume those risks. I agree to obey any orally given directions by the instructor to minimize risk. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assignees.

**Parental Consent** (Complete if applicant is under 18)

I give consent for my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to participate in the above activities, and I execute the above liability release on their behalf.

**Consent for Treatment**

I hereby give my consent to have the above applicant treated by emergency medical personnel, a physician, or surgeon, in case of sudden illness or injury while participating in the above activity. It is understood that Solar Productions will provide no medial insurance for such treatment, and that the cost thereof will be at my expense.

**I have read and understood the foregoing registration liability release and parental consent form, and agree to all of its terms and conditions.**

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Parent/Guardian Signature

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Print Name Date