# Multicultural Summer Camp Registration Form

For children of all cultures, age 5-12
June 1- August 7, 2026, 8:00 a.m. to 5:45 p.m.

## Asian American Cultural Center
## Where East meets West

11713 Jollyville Road, Austin, Texas 78759
512-336-5069
www.asianamericancc.com

Name of Child: _____Gender: M / F
Name of School:_____ Date of Birth:_____

Name of Parent/Guardian:_____
Address:_____

Home phone:_____ Cell Phone:_____
Work phone/other:_____
Employer's Name:_____
Emergency contact's name and phone number:_____
Person(s)authorized to Pickup (Except Parents):
Name:_____Phone _____TDL#_____
Name:_____Phone _____TDL#_____

Health History (please give approximate dates of occurrence):

Bleeding & clotting disorders_____
Chicken Pox_____
Diabetes_____
Epilepsy_____
Heart Disease_____
High Blood Pressure_____
Measles_____
Mumps_____
Hospitalization_____and reason(s)_____

Allergies:
Asthma_____
Food_____
Grass/tree_____
Insect bites/stings_____
Insecticide_____
Others_____

Insurance information:
Child is insured by Parent/Guardian (full name:_____)
Insurance Company:_____Policy #_____
Child's Doctor Name & Phone #_____

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Enrollment: **Week(s) of** _____
(Week of 6/1, 6/8, 6/15, 6/22, 6/29, 7/6, 7/13, 7/20, 7/27, 8/9)
Juneteenth and 7/4 Holidays observed **Enroll for one week or the whole summer**

**Multicultural: Exploring Asia Summer Camp:**

| Week | Theme |
|---|---|
| 6/1 to 6/12 | China: Dynasties and Dragon |
| 6/15 to 6/19 | Japan: Tradition Meets Innovation |
| 6/22 to 6/26 | Korea: Past Meets Pop |
| 6/29 to 7/3 | India: Colors of Celebration |
| 7/6 to 7/10 | Southeast Islands: Island Adventure |
| 7/13 to 7/17 | Asia's Influence on the World |
| 7/20 to 7/24 | Festivals of Lights and Celebrations |
| 7/27 to 7/31 | Asian Art and Aesthetic |
| 8/3 to 8/7 | Water and Nature |

**Tuition and Fees**: **$400 per week (lunch & 2 snacks are provided)**
Please make checks payable to AACC.

Parent/Guardian Authorization:

- I understand that neither AACC nor its paid staff or volunteers can be held responsible in the event of accident(s) resulting in injuries or accidental death.
- I understand that class work made by my child and photos taken of my child may be used by AACC in its future publications.
- I authorize my child to view G-rated cartoons video or movies.
- I authorize my child to be transported in AACC arranged transportation.
- I authorize my child to take part in water activities.
- I acknowledge that AACC does not offer any medical insurance to protect against any form of risk leading to injuries, and has no responsibility for any medical expenses so incurred. I agree to assume such risks and such financial responsibility.
- I declare my child is in good physical condition and has my permission to participate in all activities arranged by AACC.

- I give permission to AACC to arrange for emergency/medical personnel to carry out any types of check-ups/test/treatments as professionally required by these personnel, in case my child has an accident or becomes sick, and I cannot be reached.
- I understand the AACC Summer Classes registration policies listed above.

_____ _____

Signature of Parent/Guardian Date

***Office use only:***

Check Amount $_____ (Check # _____)

Cash Amount $_____

Date Received: _____ Received by (AACC personal initials): _____