Business Registration No.: 53256125B



PARENTAL CONSENT FORM

STEP KIDS CAMP 2018: CAMP WONDER!

Dear Parent/ Guardian,

STEP Studio is organizing its annual STEP Kids Camp: Camp Wonder!. It is a 3-day dance training programme that develops young talents for their passion and commitment to dance and the community.

It is a unique opportunity and it will be an enriching experience. Your child will be able to learn more about the local dance scene and experience what it feels like to be part of a team. They can grow their talent and improve on their performance skills and confidence as children. Most importantly, they will engage in fun activities that are highly motivating.

If you allow your child to participate in this camp, please see the details of his/her expected participation below:

Date/Day	Time	Venue	Description
3, 4, 5 December 2018 Monday - Wednesday	9:00am – 3:00pm	STEP Studio	3 Day Camp

Light refreshments & snacks will be provided for each day of the camp, and they will be supervised by STEP instructors and myself throughout the camp. If you have any questions regarding the camp, please feel free to contact us at 63974989.

You are making a decision on allowing your child to participate in the STEP Kids Camp: Camp Wonder! organized by STEP Studio. Your signature below indicates that you have read the information provided above, and allow his/her participation.

You may keep a copy of this consent form.

Yours truly,

Ms. Stephanie Loh

Founder & Artistic Director of STEP Studio

STEP Studio Peace Centre #04-13 1 Sophia Rd, S(228149)

Business Registration No.: 53256125B



PARENTAL CONSENT FORM

STEP KIDS CAMP 2018: CAMP WONDER!

I, , pare	ent of,		
(name of parent)	(name of child)		
hereby allow my child to participate in the	STEP Kids Camp: Camp Wonder!.		
I will support him/her fully and ensure his/h	ner attendance for all scheduled camp dates.		
 Signature of Parent	 Date		

STEP Studio Peace Centre #04-13 1 Sophia Rd, S(228149)

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INDEMNITY FORM

STEP KIDS CAMP 2018: CAMP WONDER!

I,	, parent of,
(name of parent)	(name of child)
acknowledge that any dance tra	aining may result in injury. I am fully aware of the risks
involved and accept the same, n	notwithstanding the fact that this activity is intended only
for those without medical probl	ems and who are fit enough to indulge in such physical
activities. I confirm that my child	has my permission to participate in the camp and I shall
not hold STEP Studio, their serv	vants and organizers responsible or in any way liable for
injury, disability, or any loss or o	damage whatsoever arising from any cause in connection
with the camp or my child's partic	cipation therein.
I hereby indemnify and agree t	o keep STEP Studio, their servants and organizers fully
indemnified against all claims, lo	ess or damage whatsoever in respect of my child's injury,
disability, or any loss or damage	whatsoever arising from any cause in connection with the
camp or my child's participation t	herein.
NRIC/ Passport* No.	Contact No.
(please delete accordingly)	(in case of emergencies)
Signature of Parent	 Date