



2915 Arlington Drive Alexandria, VA 22306

www.yoosama.com 703-765-7881

YOO'S MARTIAL ARTS 2024 DAY CAMP PROGRAM

- Highly Trained, Enthusiastic, Caring & Certified Masters & Instructors
- Discipline
- Self- Confidence
- Stay Active, Stay Fit
- Leadership
- Positive Attitude & Mindset
- Daily Field Trips
- Drop your child off on the way to work and pick them up on the way home
 *Drop off: 8-9:30 AM
 Pick Up: 5-6:30 PM

Remaining Day Camp Dates for the 2024 School are:

- **February 19**
- March 5
- April 10
- □ May 3, 27
- * Our Day Camp Dates are based on the FCPS Schedule

Pricing: \$75 Full Day/ \$50 Half Day

Call us at 703-765-7881 OR Email us at yoosmartialarts@gmail.com for more information and registration

HURRY! LIMITED SPACE AVAILABLE HELP YOUR CHILD HAVE A FUN, SAFE & EDUCATIONAL SPRING



YOO'S DAY CAMP SAMPLE SCHEDULE

(Activities may vary) 8AM-6:30 PM

DAILY SCHEDULE

7:00 AM: Drop Off & Quiet Activities
9:30 AM: Morning Meeting- Review schedule and rules. Team building
10 AM: Tae Kwon Do Training- Stretching and Kicking Basics
11 AM: Jones Point Park
12:30 PM: Lunch and rest. Supervised free time
2:00 PM: Academic & Reading Time. (Students should bring their own book)
3:00 PM: Group Games & Moral Building Drill
4:30 PM: TKD Class
5:00 PM: End of Day Meeting, Pick Up & Free Time activities or movie until. Pick up by 6:30 pm

Important Additional Information:

- After 6:30 PM, there is a late charge (\$20) for children not yet picked up
- Students must bring their snack, lunch or lunch money every day except for Friday
- □ Yoo's will provide water
- Students must bring a bathing suit and towel on **Thursday**
- □ Payments must be made by the Friday before the start of the next scheduled camp week

If you have any questions, feel free to contact Master Jon at <u>yoosmartialarts@gmail.com</u>

YOO'S MARTIAL ARTS 2024 DAY CAMP APPLICATION

Student's Name	DOB
Additional Member	
Additional Member	DOB
Parent's Name	Occupation
Parent's Name	Occupation
Address	
City	StateZIP
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Name of Student's School	Grade

EMERGENCY- Who would you like us to call first in case of an emergency?

Name	Relation
Work Phone	Cell Phone

WAIVER AND RELEASE: I agree to waive any and all claims against persons connected with Yoo's Martial Arts. This should also serve as permission to have the above student(s) transported and to receive any and all emergency medical health care should the situation arise. I understand that Yoo's Martial Arts has the right to remove my child from the program and Yoo's Martial Arts is not responsible for personal property lost or stolen while members and/or program participants are using Yoo's Martial Arts facilities or on premises. I give permission the Yoo's Martial Arts to use, without obligation, photographs film footage, my child's image or voice for purposes of promoting or interpreting Yoo's Martial Arts programs. This also serves as specific permission to transport my child to and from the facility. I acknowledge the waiver and accept the conditions set forth above.

Signature (Guardian)		Date	
TUITION: Registering for 1 week (Check the dates below)			
2/19 () 3/5 ()	4/10 () 5/3() 5/27 ()	
At the rate of \$			
Pay be Credit Card: Card #			
•		Zip Code	

*Payments must be made the Friday before the next Day Camp date**