

RIEKES CENTER CREATIVE ARTS APPLICATION SUMMER PROGRAMS

3455 Edison Way Menlo Park, CA 94025 main: 650-364-2509 fax: 650-261-6006

Student Information:

Name: _____	Date: _____
Birth Date: ___/___/___ Gender: M F	School: _____
Student Email: _____	
Student Cell Phone: (____)____-_____	Grade: _____

CAMP NAME _____ **Start Date** _____

CAMP NAME _____ **Start Date** _____

Are you applying for Financial Aid? Yes No

If yes, you will need to schedule a financial aid appointment. Call (650) 364-2509 to set up an appointment.

ROCK CAMP ONLY What instrument do you play? _____

How long have you played? _____

1. What are your goals in your area of interest? "I will be satisfied when...."

2. Do you have any previous experience? Tell us about it...

3. Name a few of your favorite artists & artistic influences

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Family Information:

Parent/Guardian: _____	Home Phone: (____)____-_____
Parent/Guardian: _____	Cell Phone: (____)____-_____
Address: _____	Work Phone: (____)____-_____
City: _____ Zip: _____	Emergency Contact: _____
Primary Email: _____	Emergency Phone: (____)____-_____
Immediate Family Currently or Previously Attending: _____	

Admission Information: *(please check the appropriate box)*

How did you hear about the Riekes Center? (Please circle)	
<input type="checkbox"/> Family Member	<input type="checkbox"/> Internet Ad - Coach or Teacher: Name: _____
<input type="checkbox"/> Search Engine/Browsing - Newspaper Ad	<input type="checkbox"/> Poster or Flier
<input type="checkbox"/> Friend: Name: _____	<input type="checkbox"/> - Other _____

Signatures Needed:

Initial application forms completed and signed:	
I have read, understand and agree to uphold the Riekes Center Philosophy, Values, and Policies (pages 4 and 5)	
Signature: _____	Date: _____
I have read, understand and agree to abide by the Riekes Center Payment Policies (page 5)	
Signature: _____	Date: _____

AGREEMENT AND RELEASE FROM LIABILITY

VOLUNTARY ENROLLMENT

I, _____, the undersigned participant or parent or guardian ("Releasor"), acknowledge that I have voluntarily enrolled myself and/or my child _____ (individually or collectively "Participant") in a program of strenuous physical activity, which may include, but is not limited to, such activities as weight training, aerobic machinery exercises, sport-specific drill work and agility training (the "Training Program"); and/or hiking, outdoor camping, and wilderness activities (the "Nature Studies Program"); and/or chemicals used for the development and processing of black and white photography (the "Photography Program") (collectively, the "Programs") offered by the Riekes Center for Human Enhancement (the "Riekes Center") and at any and all other locations involved in any of the Programs offered at the Riekes Center.

ASSUMPTION OF RISK

Participant is aware that the Programs and/or use of the Riekes Center facilities may involve activities that may be considered hazardous. Participant is voluntarily participating in any Program with knowledge of the danger involved. Participant understands that it is his/her responsibility to obtain a physical examination from a medical doctor to determine his/her present health and medical condition before beginning a Training Program or activity. By placing my initials below, Participant hereby agrees to accept any and all risk of injury or death to Participant relating to the any of the Programs or use of the Riekes Center facilities.

(initials)

RELEASE

As consideration for being permitted by the Riekes Center to participate in any of the Programs and use of facilities, I hereby agree that I, my assignees, heirs, distributees, guardians, and legal representatives or my enrolled child or such enrolled child's assignees, heirs, distributees, guardians and legal representatives, will not make a claim against, sue, or attach the property of the Riekes Center and any of its affiliated organizations for injury or damage resulting from the negligence or other acts, howsoever caused, by any employee, agent, or contractor of the Riekes Center or any of its affiliated organizations as a result of my participation in any of the Programs. I hereby release the Riekes Center and any of its affiliated organizations, its employees and agents from all actions, claims, or demands that I, my assignees, heirs, distributees, guardians, and legal representatives, or that my enrolled child or such enrolled child's assignees, heirs, distributees, guardians, and legal representatives, now have or may hereafter have for injury or damage resulting from my or my enrolled child's participation in any of the Riekes Center's Programs.

COMPLIANCE WITH RULES

Participant agrees that he/she will abide by all rules and regulations regarding any of the Programs that may be established by the Riekes Center or its agents. Participant understands and agrees that if the Riekes Center or any of its agents determines that Participant has violated any of the Riekes Center's rules or regulations, Participant may immediately be discharged from any of the Programs and the Riekes Center's facilities without any reimbursement for any payment to the Riekes Center.

TALENT RELEASE

I consent without further consideration or compensation to the use (full or in part) of all videotapes or still photographs taken of me or by me and/or recordings made of my voice in whole or in part by the Riekes Center for the purposes of illustration, broadcast, or distribution in any manner.

(initials)

KNOWING AND VOLUNTARY EXECUTION

Participant has carefully read this agreement and fully understands its contents. Participant is aware that this is a release of liability and constitutes a contract between Participant and the Riekes Center and/or its affiliated organizations, and executes it voluntarily. This constitutes the entire agreement between Participant and the Riekes Center regarding the subjects contained in this Agreement, including assumption of risk, release from liability, and compliance with the Riekes Center's rules and regulations. This agreement may only be amended in writing, signed by Participant and an executive officer of the Riekes Center.

Executed at _____, California, on _____, 20____.
City Date

Signature of Releasor

Type or Print Name

DECLARATION OF WITNESS

I certify that _____ acknowledged in my presence that he/she had read and fully understood the meaning and consequences of the foregoing release, and signed it in my presence.

Executed at _____, California, on _____, 20____.
City Date

Signature of Witness (Riekes Center Employee)



Welcome!

I'd like to welcome you to the Riekes Center for Human Enhancement. The Riekes Center is a nonprofit mentoring organization that uses the Creative Arts, Athletic Fitness, and Nature Studies to help students define and accomplish their individual goals, build character and learn transferable life skills. Not only is it a responsibility of each participant, but also it is a core value at the Riekes Center, to create an environment where all students, all goals, and all interests are equally important. It is crucial that each participant (you!) adhere to the following responsibilities:

Honest Communication

There is no comparative analysis between students at the Center.

Our mission—to create the best possible opportunity under the core values of enhancement—requires your critique and input. There are no “dumb” questions.

Self-Supervision

Students are responsible for (a) scheduling sessions, (b) coming to appointments on time, and (c) making payments in a timely manner.

All students must check in with the front desk upon arrival and check out upon departure.

You must take responsibility for your behavior at the Center. Our motto, “***Leave this place better than you found it,***” refers both to the effect the Riekes Center has on each student and the effect each student has on the Center. Therefore, we expect each student to act like a responsible conservator of the environment.

Cigarettes and tobacco products, alcohol, illegal substances of any kind, and weapons are unequivocally prohibited anywhere on or near the premises.

Sensitivity to Others

It is important that the student body at the Center exist in non-judgment and mutual respect. The Riekes Center is a collection of the thoughtfulness and energy, which each individual places in the environment.

We believe in making every student welcome to the Center. As part of this effort, we will try to introduce you to as many other students as possible. We encourage you to practice sensitivity to others during introductions. Try to see things through the eyes of others and make everyone feel welcome and important.

No profanity is allowed.

The Riekes Center is proud to be a part of the Fair Oaks residential neighborhood. Please drive carefully, keep your music at a low level, and maintain the integrity of our neighborhood. To avoid creating neighborhood traffic congestion, please enter and exit Edison Way from Fifth Avenue. Pick up and drop off passengers only in our parking lot and never in the street.

KEEP THIS PAGE FOR FUTURE REFERENCE

Honor Code

The following guidelines have been created to help you enjoy your experience at the Riekes Center. Please abide by this honor code. We take it very seriously.

- The Riekes Center exists as a classroom; whether it's the recording or film studio, weight room or basketball court, therapy offices, or field station. No one is allowed to participate at the Riekes Center without prior scheduling. Visitors and parents are welcome to schedule guided tours through the Center. However, they must remain in the waiting area during student participation.
- NO FOOD OR DRINKS IN THE CREATIVE ARTS ROOMS
- Please enjoy our kitchen area while at the Center. Please do not take any food outside of the kitchen and onto the workout floor.
- There is a phone in the reception room for local calls. Please do not use any of the phones in the office areas.

*With Great Respect,
Gary Riekes*

For Parents:

Creative Arts Payment & Admissions Policies

1. **Cancellation/Refunds.** In the event that the program is cancelled by the Riekes Center 100% of your tuition will be refunded. If you choose to leave the program before the 2nd day of the program, you will receive a refund for the amount of tuition, less the \$100 deposit. Once day 2 of the program begins, tuition is non-refundable.
2. **Returned Check Fee.** A \$25.00 fee will be charged for any returned checks or credit card charges.

Environment

1. Riekes Center property willfully lost, destroyed, or damaged by a student must be replaced or repaired at the expense of the Responsible Party.
2. In the event that a student violates any of the rules, regulations, or conditions of enrollment herein contained or posted on the Riekes Center premises, or conveyed by Riekes Center staff or management, the Riekes Center may suspend or terminate the enrollment without tuition refund.

If paying by cash/check, please disregard this page

NAME OF STUDENT _____

CAMP _____ DATE(S): _____ COST: _____

CAMP _____ DATE(S): _____ COST: _____

Check this box to pay the deposit only

I authorize the Riekes Center to charge a non-refundable deposit in the amount of **\$100** to my VISA or MasterCard.

Check both boxes to charge the full amount to your credit card NOW

I authorize the Riekes Center to charge the remaining tuition for the above named student and program(s) to my VISA or MasterCard.

The balance of your tuition (if applicable) is due on the 1st day of Camp.

Signature

Date

Credit Card No. - - -

Expiration Date: _____ / _____
MONTH YEAR

PLEASE PRINT ALL INFORMATION

Cardholder's Name: _____
PLEASE PRINT

Billing Address: _____
STREET

CITY/STATE ZIP

Telephone: _____
 HOME WORK CELL
PLEASE INCLUDE AREA CODE

Alternate Telephone: _____
 HOME WORK CELL
PLEASE INCLUDE AREA CODE

Email Address: _____

If you would like to make a donation, please speak to a staff member at the front desk. All donations are 100% tax-deductible.