

NOW. YEAR HERE. BOOK US.

SUMMER YEARBOOK CAMP

Hosted by: Rianne Price and Mike Page | Presented by: Jeff Moffitt

When:

August 5th-7th 2019

Where:

Hartland High School
10635 Dunham Rd
Hartland, MI 48353

Cost:

Early Registration - Before July 19th, 2019

Student Registration: Aug. 5th-7th - \$150

Student Registration: Aug. 5th & 6th - \$100

Student Registration: Aug. 7th Only - \$50

Adviser Registration: \$60

* After July 19th, 2019 there is a \$25 late fee per a person.

**In an effort to reduce the cost of the workshop for attending schools, we will offer a special rate of \$100 per a person for all three days if you can bring five or more staff members to all three days of the workshop.

How to Register:

Please register on-line at www.yearbooknerds.com and send payment to:

Rianne Price
12850 Tradition Trl.
South Lyon, MI 48178

You may also fill out the included registration form and send it in with your deposit.

How to pay:

We can accept personal checks, money orders, and school checks made payable to **RIANNE PRICE**. We cannot accept checks made out to Jostens and will return any Registration forms that come with a check made out to Jostens.

Agenda

Day 1

Monday August 5th - 8:45 AM - 3:00 PM

Check in begins at 8:30 AM

Day 1 is wrapped around theme development and planning the content for your yearbook.

Day 2

Tuesday August 6th - 8:45 AM - 3:00 PM

Day 2 focuses on verbal and visual aspects of the yearbook including design and typography. The verbal emphasis focuses on caption, story and headline writing.

Day 3

Wednesday August 7th - 8:45 AM - 3:00 PM

Day 3 Putting it all together and Marketing the book.

Absolutely all information must be complete for your registration to be processed. Please fill out this form and print neatly or register on-line at www.yearbooknerds.com

Send \$50 non-refundable deposit or payment in full with this form.

Checks must be made payable to "Rianne Price" or your registration and deposit will be returned.

Your Name _____

Home Address _____

City, State, Zip _____

Home Phone _____

Email _____

Adviser Name _____

Photography Track Design Track

T-shirt Size (CIRCLE ONE): **SM - MD - LG - XL - XXL**
Default will be a large T-Shirt

Payment Information

All checks, money orders, or purchase orders must be made payable to "Rianne Price" or your Registration and deposit will be returned to you. Please put your name and school name in the memo portion of your check. School purchase orders will only be accepted until July 20th. Final payment due in full no later than Friday, July 20th. Participant rate includes lunch and snacks starting with first-day lunch, ending with last day lunch, special events, and all materials. Registration and check-in begins Monday, August 5th at 8:30 AM. Checkout time is Wednesday, August 7th at 3:00 PM. No refunds are available after July 26th. However, another student may be substituted by contacting one of the coordinators. Late Fee is \$25. After July 19th, 2019

Payment Plan <input type="checkbox"/> Personal Check <input type="checkbox"/> School Check <input type="checkbox"/> Purchase Order Mail Form and Payment to: Rianne Price 12850 Tradition Trl South Lyon, MI 48178
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CHECK THE BOX THAT APPLIES:

Please be sure to send in your form and deposit by the due date. There is a \$25 late fee per a person after July 19th, 2019

I am registering for Aug. 5, 6 & 7 \$150

I am one of five staff members attending for Aug. 5, 6 & 7 \$100

I am registering for Aug. 7th only \$50

I am registering as an Adviser \$60

Release Form- Send with a check on First day!
This form must be completed for each student.

Emergency Contact: _____

Home Phone: _____

Alternate #: _____

In consideration of the educational opportunity provided, the above student or adult, I/we the parent(s), legal guardian(s) or spouse of the above named person, or myself, do hereby hold harmless, release and forever discharge Jostens, Inc., All Jostens Representatives, Hartland HS at which the workshop described herein will be held, and their officers, agents and employees from any and all claims, demands, liability, actions, causes of action, attorney fees and expenses on account of damages to personal property or personal injury which may result from causes beyond the control of, and/ or without the fault or negligence of Jostens, Inc., all Jostens sales representative and employees, during the workshop.

I/we also give permission that medical attention be administered to the above named or myself in case of emergency. I/we understand that any medical assistance of a more serious nature will be brought to our/ my attention as conditions permit.

In case of emergency treatment is required, my/ our health insurance plan number and carrier are:

Insurance Carrier _____

Policy Number _____

I understand that the emergency contact will be notified as soon as such communication can be made.

Parent or Guardian Adult's Signature _____

Date _____