Grade in the Fall

PLEASE PRINT AND COMPLETE ALL INFORMATION CHILD MUST BE 5 YRS OLD BY SEPT 1 TO ENTER CAMP

CHILD MUST BE 5 YRS OLD BY SEPT 1 TO ENTER CAMP ONE FORM PER CHILD			
STUDENT'S NAME			Age
FINANCIAL PARENT		Relationship	
Address/City/State/Zip			
Iome Phone Work Phone			
*Mandatory Email Address:			
SECOND PARENT			
Home Phone	Work Phone	Cell Phone	
ATTACH ANY SPECIAL MEL	DICAL INFORMATION OR	SPECIAL CUSTODY INFORMATI	ON TO THIS FORM
➤ CAMP FEES ARE DUE THE FIRST DAY YOUR CHILD ATTENDS CAMP EACH WEEK. No Daily Rates and No Refunds Once Your Child Has Been Signed In. ➤ As the legal guardian I hereby give my consent for the above named student to participate in any activities during the Summer Camp Program. This is not limited to but includes computer classes. I authorize school personnel to obtain, through a physician of choice, any emergency medical care	Student Name	Grade Grade Grade	going in to:
		E HAVE MY PERMISSION TO PICK UP MY CHILD (print legible) Phone	
that may become necessary for the student in the course of these activities. I also	Name	Phone	
agree not to hold the school or anyone acting in its behalf responsible for any		Phone	
I understand that a LATE FEDuring the course of the sum	g current contact & telephone IE of \$1 per minute will be cl ner photos are taken of cam	information changes to the above list harged as a late fee for pickups afte pers during activities and used to a notice to your child's Site Manager	er 6pm. dvertised camp, if you do
Financial Parent Signature:		Date	
Non-Refundable Registration Fee (\$20			check or money order only)

(Registration fee is \$30 after May 22)