

Senior Camp

PAYING FOR ALL 9 WEEKS

Registration Contract for Full Summer

Child's Name: _____ Birthdate: _____ Grade FINISHING IN 6/09: _____

Parent(s) Name(s): _____ Home Phone: _____

Address: _____ Parent Email: _____

Does your child have any allergies?: _____ If so, describe: _____

Does your child have any special needs? : _____ If so, describe: _____

Will your child need to take medication during the course of the day?: _____

If so, please tell us what and when and for what condition: _____

Weekly Schedule: Full time (5 days) _____ **OR**
Part Time (circle scheduled days) – M T W TH F

Are you eligible for the 10% church discount? Y or N – please sign clause in parent agreement / policies (parents must be faithfully attending and financially supporting Calvary Full Gospel Church)

For all signatures below, "I" is assumed to be the parent/guardian of the child attending summer camp.

PAYMENT OPTION - choose one

_____ I will pay WEEKLY – due on Mondays, beginning June 22nd. I understand that there is a \$25.00 late payment fee if tuition is received after TUESDAY.

OR

_____ I will pay MONTHLY – due on June 22nd, July 1st, and August 1st. I understand that there is a \$50.00 late payment fee if tuition is received after June 24th, July 2nd or August 3rd.

Transportation Fee (choose one)

_____ Paid in full with this form

_____ Paid ¾ with this form – other ¼ due by July 1st

OFFICE USE ONLY:

Total summer tuition due: _____

Total summer bus fee due: _____

Total summer trip fees due: _____

Total due for summer: _____

Contract for Full Summer Enrollment:

I understand that my child's position is reserved for the full summer, from June 22nd through August 21st (9 weeks). I will pay for these 9 weeks IN FULL, regardless of non-attendance due to vacation, illness, etc. I will additionally pay the bus fee of \$285.00 per child.

TRIP PARTICIPATION AGREEMENT

Calvary Child Care Center will be providing proper supervision and adequate personnel for the planned activities, and is covered by Brotherhood Mutual Insurance Company. However, in the event of bodily or personal injury, except for gross negligence, parents are expected to inform their own personal medical insurance provider. I give my permission for my child to attend the listed field trips and be transported by First Student Bus Company, Calvary Child Care Center mini-van, or Calvary bus. I release Calvary Child Care Center of any and all liability that may arise from the trips (except as noted above – only due to gross negligence). I understand that trips may be changed due to inclement weather or other reasons. I further understand that field trip attendance is contingent upon my child's behavior. I agree to schedule myself or another family adult to chaperone two trips during the summer.

Parent Signature

Date

Student Agreement: I agree to respect and cooperate with the adults in charge. I acknowledge that I know that all electronics, including cell phones, need to be left at home. I additionally acknowledge that I have read that closed toe shoes must be worn, so I will not wear flip flops or open toe sandals to camp.

Student Signature