

Dear Parents,

We are offering 5 weeks of summer enrichment program for our 3 and 4 year olds. We will have only limited space.

**The children have to be 3 years old by May 31<sup>st</sup>, and potty trained before camp starts.**

The cost is \$70.00 per week and the hours are from 9am – 12pm.

**Registration will begin March 5<sup>th</sup>.** Registration forms will be available in the rack outside the preschool office.

**Registration deadline is May 15<sup>th</sup> in order for the teachers to plan the classroom activities.**

The weeks offered are as follows:

Week 1 June 18 – 22

Week 2 July 09 – 13

Week 3 July 16 – 20

Week 4 July 30 – Aug. 3

Week 5 Aug. 6 – 10

**A \$30 Non-Refundable deposit will be due at sign-up for each week of summer camp needed.**

**The deposit will be deducted from the weekly camp fee.**

- **Active Church Member Discount** –If you are an active church member/family there is a \$5.00 discount on weekly tuition for the 1<sup>st</sup> child enrolled and a \$5.00 discount on weekly tuition for the 2<sup>nd</sup> child enrolled. There is a \$10.00 discount on weekly tuition for the 3<sup>rd</sup> child as long as they are enrolled in the **same week**.
- **Sibling Discount** –When siblings are enrolled in Summer Camp during the **same week** there is a \$ 5.00 discount on weekly tuition for the 2<sup>nd</sup> child and \$10.00 discount on weekly tuition for the 3<sup>rd</sup> child.

**\*\*We are able to honor only the Active Church Member or Sibling discount per family\*\***

Sincerely

Birgit Corron

Summer Camp Director

# Covenant Kids Preschool Summer Camp 2018 Registration Form for 3's and 4's

Hours: 9AM – 12PM

Cost: \$70.00 per Week

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ M or F Age: \_\_\_\_\_

Address/City/Zip: \_\_\_\_\_

Primary email \_\_\_\_\_ Primary Phone Number: \_\_\_\_\_

Father's/Guardians Name \_\_\_\_\_ Cell # \_\_\_\_\_

Address if different from above:  
\_\_\_\_\_  
\_\_\_\_\_

Email address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mother's/Guardians Name \_\_\_\_\_ Cell # \_\_\_\_\_

Address if different from above:  
\_\_\_\_\_  
\_\_\_\_\_

Email address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Child's Name \_\_\_\_\_ has the following allergies: \_\_\_\_\_

· Children picked up after closing time will be charged a \$1.00 per minute late fee, due at the time of pick up.

Office Use: Check # \_\_\_\_\_ Amount: \_\_\_\_\_ Cash: \_\_\_\_\_ Today's Date: \_\_\_\_\_ Staff Initials: \_\_\_\_\_

## Weeks offered for Preschool camp

**A \$30 Non-Refundable deposit is due for each week of summer camp needed.**

		Balance due	\$
○ Week 1	June 18 – 22, 2018	June 11 <sup>th</sup>	40.00
○ Week 2	July 09 – 13, 2018	July 2 <sup>nd</sup>	40.00
○ Week 3	July 16 – 20, 2018	July 9 <sup>th</sup>	40.00
○ Week 4	July 30 – Aug. 03, 2018	July 23 <sup>rd</sup>	40.00
○ Week 5	Aug. 06 – 10, 2018	July 30 <sup>th</sup>	40.00

Choose the weeks you are interested in and attach payment with the registration form.

PLEASE **CALCULATE THE TOTAL SUMMER DEPOSIT DUE BELOW.**

# of Weeks Attending \_\_\_\_\_ x \$30 Deposit/Week = \_\_\_\_\_ TOTAL DEPOSIT DUE

BY SIGNING THIS FORM, I UNDERSTAND THAT I AM REQUIRED TO PAY A \$30 NON-REFUNDABLE PER WEEK DEPOSIT FOR EACH WEEK THAT I REGISTER FOR. THIS \$30 DEPOSIT WILL BE DEDUCTED FROM THE WEEKLY TUITION DUE. THE BALANCE OF TUITION FOR EACH WEEK WILL BE DUE ONE WEEK IN ADVANCE.

Father's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

Mother's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

- **Active Church Member Discount** –If you are an active church member/family there is a \$5.00 discount on weekly tuition for the 1<sup>st</sup> child enrolled and a \$5.00 discount on weekly tuition for the 2<sup>nd</sup> child enrolled. There is a \$10.00 discount on weekly tuition for the 3<sup>rd</sup> child as long as they are enrolled in the **same week**.
- **Sibling Discount** –When siblings are enrolled in Summer Camp during the **same week** there is a \$ 5.00 discount on weekly tuition for the 2<sup>nd</sup> child and \$10.00 discount on weekly tuition for the 3<sup>rd</sup> child.

**\*\*We are able to honor only the Active Church Member or Sibling discount per family\*\***

## Child Information Summer Camp 2018

**Emergency Contacts:** Persons to contact in case of an emergency when you or your child's guardians can NOT be reached.

Name: \_\_\_\_\_ Relationship / Phone# \_\_\_\_\_

Name: \_\_\_\_\_ Relationship / Phone# \_\_\_\_\_

Name: \_\_\_\_\_ Relationship / Phone# \_\_\_\_\_

**Approved Pick Up:** Other than parents/guardians, persons authorized to pick up your child/children.

Name: \_\_\_\_\_ Relationship / Phone# \_\_\_\_\_

Name: \_\_\_\_\_ Relationship / Phone# \_\_\_\_\_

Name: \_\_\_\_\_ Relationship / Phone# \_\_\_\_\_

**Doctor / Insurance Information:**

Primary Doctor: \_\_\_\_\_ Office Phone #: \_\_\_\_\_

Dr. Address: \_\_\_\_\_

Hospital Preference: \_\_\_\_\_ Insurance Provider: \_\_\_\_\_

Name Policy is under: \_\_\_\_\_ Policy Number: \_\_\_\_\_