

## **ENROLLMENT AGREEMENT**

Child's Name:			Date of Birth:	
Parent/Guardian Name(s):				
Enrollment Date:				
My child will attend Dragon's	Den Summer Camps on the	e following days a	nd times:	
<b>Summer Camps</b> 7:00-6:00	M T W	TH F		
Weekly Tuition Rates:				
W 1: 7/1-7/5	\$197	v	V 5: 7/29-8/2	\$217
W 2: 7/8-7/12	\$217	W	V 6: 8/5-8/9	\$217
W 3: 7/15-7/19	\$217	w	V 7: 8/12-8/16	\$217
W 4: 7/22-7/26	\$217	□ w	V 8: 8/19-8/23	\$217
<ul> <li>At the time of regist account. The balance \$25 charge for any note.</li> <li>I understand that in a on any given day.</li> <li>I understand that a land Dragon's Den's operations of services, nor will the termination of service.</li> <li>I understand that tuited</li> </ul>	rstand Dragon's Den's tuitic ration, a \$20 non- refundat of camp tuition for all week on-sufficient funds checks. accordance with Washingto ate pick-up fee of \$1 per minating hours. The late pick-up late fee be applied toward	ole deposit per was is due 2 weeks per on State law, my conute per child will fee does not contuition. Chronic laws	brior to the register hild cannot be in ca I be assessed when estitute an agreement ateness at closing ti	ed week. There will be a are longer than 10 hours a my child is left beyond nt to provide afterhours me may be grounds for
Parent/Guardian Signature:			Date:	