

**Directions:** Please complete and provide this Early Registration form for Summer Camp along with the 50% Summer Camp. Registrations received after April 15th will require a registration fee of \$40. Summer Camp fee is \$250/week from 9-3pm. Before and/or after care will be \$10/hr.

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**Select Schedule:**

7/22-7/26       7/29-8/2       8/5-8/9       8/12-8/16  
 8-9pm       3-4pm

**Child's Information**

Name: \_\_\_\_\_  
First Middle Last

Gender:  Female  Male      Date of Birth: \_\_\_/\_\_\_/\_\_\_      Age on 8/1/2019: \_\_\_\_\_

**Parent / Guardian #1 Information**

Relationship to Child: \_\_\_\_\_

Name: \_\_\_\_\_  
First Middle Last

Email: \_\_\_\_\_ Mobile Phone/Text: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Parent / Guardian #2 Information**

Relationship to Child: \_\_\_\_\_

Name: \_\_\_\_\_  
First Middle Last

Email: \_\_\_\_\_ Mobile Phone/Text: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Office Use Only:**

Date Registration Form Received: \_\_\_/\_\_\_/\_\_\_      Deposit Check #: \_\_\_\_\_      Amount: \_\_\_\_\_  
Confirmed Schedule: Y / N / Wait List Information: \_\_\_\_\_      Initials: \_\_\_\_\_