

# SMLC Preschool 2026 Summer Camp Registration Form

Please check the session(s)  
to be enrolled in:

June Session \$320: \_\_\_\_\_

July Session \$240: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_ Name to go by: \_\_\_\_\_

Child's Date of Birth: \_\_\_\_\_ Class/grade last completed: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Mother's Email: \_\_\_\_\_

Mother's Cell Phone Number: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Father's Email: \_\_\_\_\_

Father's Cell Phone Number: \_\_\_\_\_

Child's Doctor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Medical Insurance: \_\_\_\_\_ Policy Number: \_\_\_\_\_

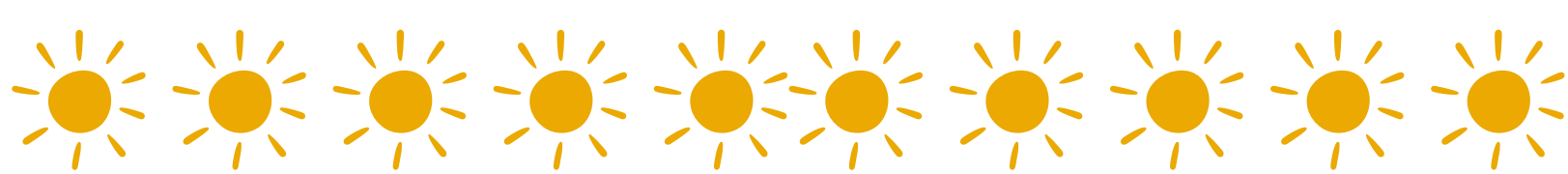
Any known allergies or special information we should know:

\_\_\_\_\_  
\_\_\_\_\_

May we post pictures to our Facebook, Instagram, or our

Website of your child? Yes \_\_\_\_\_ No \_\_\_\_\_





## Emergency Contact/Approved Pick-Up

Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

### Liability Release/Tuition and Fees:

I hereby assume all risk of personal injury for all the years my child is attending or participating in SMLC Preschool activities. I give permission to the school to call the doctor or paramedics for medical care for my child should an emergency arise. It is understood that a conscientious effort will be made to locate the child's parent or guardian. However, if it is not possible to locate the parents or guardian, this responsibility will be accepted by SMLC Preschool. I release SMLC Preschool Staff, Board, Director, Teachers, Aides, substitutes, or Volunteers from any and all liability arising from claims of injuries or damages that either individually or on behalf of your child might occur while any of these individuals are performing their duties.

I understand that tuition fees are due by the 1<sup>st</sup> day of the month of camp or can be paid in advance and agree to pay through the Brighthwheel app, Square (fees apply), by check, or by cash.

Registration fee is \$35.00/Child, 60.00/Family

(Due at time of Enrollment)

We only offer by the month

Tuition is \$320/June

June 1-5, 8-12, 15-19, 22-26

\$240/July

July 6-10, 13-17, 20-24

Parent Name (Printed): \_\_\_\_\_

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

Director signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only:  
Immunization Record  
on file: \_\_\_\_\_  
Registration Fee  
Paid: \_\_\_\_\_