

Sneak Preview Camp Enrollment Form

Enrollment is by the week only. We apologize, but split week enrollments are not available.

Child's Name: _____ Parent's Name: _____

Child's Age: _____ yr. _____ mos. Teacher's Name: _____

Emergency Contact: _____

Name: _____

Address: _____

Telephone Number: _____

All participants must be pre registered prior to May 28, 2019.

We are unable to accept walk-in enrollments due to prior staffing arrangements.

Check the programs desired and fill in the appropriate amounts, total and send with payment to the office.

Please return this form by May 28, 2019.

WEEK ONE. 6/6/19 & 6/7/19
(7:00 am - 5:45 pm)

Stories, Videos & Games, Craft Activity, Special professional shows Gymnastics and Movement, Outside Activity/Story time Bikes, Movies/Music,

Nursery/Kindergarten \$156.00

Pre-first/Elementary \$160.00

WEEK TWO. 6/10/19 - 6/14/19
(7:00 am - 5:45 pm)

Stories, Videos & Games, Craft Activity, Special professional shows Gymnastics and Movement, Outside Activity/Story time Bikes, Movies/Music.

Nursery/Kindergarten \$390.00

Pre-first/Elementary \$400.00

WEEK THREE. 6/17/19 - 6/21/19
(7:00 am - 5:45 pm)

Stories, Videos & Games, Craft Activity, Special professional shows Gymnastics and Movement, Outside Activity/Story time Bikes, Movies/Music.

Nursery/Kindergarten \$390.00

Pre-first/Elementary \$400.00

TOTAL COST FOR ALL WEEKS (Due in advance) \$ _____

I give permission for my child to attend the Interim Camp and participate in all activities. A medical permission form is on file in the office and may be used if needed. I understand that camp and school programs involve activities that may come with certain risks. I realize that no environment is risk-free I am aware of these risks, and I am assuming them on behalf of my child.

Signature _____

Date _____