

# Spring Interim 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: \_\_\_\_\_

Check the programs desired and fill in the appropriate amounts, total and send with payment to the office. Please return this form by **April 5, 2019**.

**4/15/19- 4/18/19**  
**(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** \$312.00

**Pre-first/Elementary** \$320.00

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

I give permission for my child to attend Spring 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 \_\_\_\_\_