

June 4 – August 3, 2018

# Summer of Wonder

## Calvary Christian Academy Summer Camp Registration

Name \_\_\_\_\_ M\_\_ F\_\_ Tee shirt size Youth - S, M, L, XL,  
Adult – S, M,  
Birthday \_\_\_/\_\_\_/\_\_\_ Age\_\_\_ Grade completed \_\_\_ School Attending \_\_\_\_\_  
(Campers must have completed grades K – 5<sup>th</sup>)  
Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_  
Address \_\_\_\_\_  
Cell # \_\_\_\_\_ Other Phone# \_\_\_\_\_ Email \_\_\_\_\_

**Registration Fee( per child):**

(Non-Refundable)  
By May 4<sup>th</sup> \$25  
After May 4<sup>th</sup> \$40  
(This secures your spot)

**Rates:** 8:00-4:00 daily camp sessions  
\$130/wk includes: all frequent weekly trips to  
parks, movies, splash pads, community buildings  
(fire stations, etc), and a tee shirt along with the food  
program of breakfast, lunch, & snack!  
\*Premium field trip fee due separately

**Daily Rate:** 8:00-4:00 daily camp sessions  
\$35 per day (plus entry fee for field trips due Monday the week of)  
also includes the food program of breakfast, lunch, and snack

**Extended Care Fee:** \$50 per week 4:00 PM – 6:00 PM  
**Daily Fee:** \$10 / day

I understand all fees which apply to me are to be paid at the school office, in full, the Friday prior to the week my child is attending. I agree to pay the cost of any field trip beyond \$5 (no more than one a week) the Monday of the week attending. I also understand if my child/children are absent on a paid field trip day, *if refundable*, the amount will be credited to my account. I agree that I will use the breakfast, lunch & snack program each day **OR** pack my child/children's lunch & snack each day; please check only **ONE**.

\_\_\_\_\_ I will participate in the breakfast, lunch & snack program, \_\_\_\_\_ Pack lunch daily  
and complete the program registration.  
Parent signature \_\_\_\_\_

My child will be a:  
\_\_\_\_\_ Full Time Camper (\$130 per week) **OR** \_\_\_\_\_ Part Time Camper (\$35 per day)  
**On space available basis**

<b>For Office Use Only</b>		
Reg. Fee Paid _____	Copy to Finance _____	Copy to Camp Director _____

