

Rec Day Camp Registration Form Ages 5-12 yrs

Parent Portion:

Child Name _____ Parent Name _____

Parent Email _____

Choose Your Days:

Mark C for Camp only, 9:00-3:00pm
 Mark CA for Camp and AM extended care, 7:30am-3pm
 Mark CP for camp and PM extended care, 9:00am-6pm
 Mark CAP for Camp and both extended care 7:30am-6pm

JUNE 2017

MON	TUE	WED	THU	FRI
19	20	21	22	23
26	27	28	29	30

July 2017

MON	TUE	WED	THU	FRI
X	X	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28
31	X	X	X	X

August/September 2017

MON	TUE	WED	THU	FRI
X	1	2	3	4
7	8	9	10	11
14	15	16	17	18
21	22	23	24	25
28	29	30	31	1

Office Use Only:

Rec Camp

Qty _____ Rate \$ _____ Total Cost \$ _____

Extended Care

AM Qty _____ Rate \$ _____ Total \$ _____

PM Qty _____ Rate \$ _____ Total \$ _____

Both Qty _____ Rate \$ _____ Total \$ _____

Total Extended Care Cost : \$ _____

Total Cost \$ _____

PIF Discount (ends 5/31/17) \$ _____

Annual Member Ship Fee \$ _____

Grand Total: \$ _____

Payment Options

Pay In Full:

One payment \$ _____ (if paid by 5/31/17).

3 Payments :

25% Deposit \$ _____ and two monthly installments \$ _____ each.

4 Payments:

25% Deposit \$ _____ and three monthly installments \$ _____ each.

*Monthly installments start June 2017

*Balances under \$100 must be paid in full.

*Non-Members must complete agreement prior to registration

Preschool Day Camp Registration Form Ages 3-5 yrs

Parent Portion:

Child Name _____ Parent Name _____

Parent Email _____

Choose Your Days:

3 Days/ Week or 5 Days/ Week

Mark C for camp days 10:45am-2:45pm

JUNE 2017

MON	TUE	WED	THU	FRI
19	20	21	22	23
26	27	28	29	30

July 2017

MON	TUE	WED	THU	FRI
X	X	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28
31	X	X	X	X

August/September 2017

MON	TUE	WED	THU	FRI
X	1	2	3	4
7	8	9	10	11
14	15	16	17	18
21	22	23	24	25
28	29	30	31	1

Office Use Only:

Preschool Camp

Qty _____ Rate \$ _____ Total Cost \$ _____

Total Cost \$ _____

PIF Discount (ends 5/31/17) \$ _____

Annual Member Ship Fee \$ _____

Grand Total: \$ _____

Payment Options

Pay In Full:

One payment \$ _____ (if paid by 5/31/17).

3 Payments :

25% Deposit \$ _____ and two monthly installments \$ _____ each.

4 Payments:

25% Deposit \$ _____ and three monthly installments \$ _____ each.

*Monthly installments start June 2017

*Balances under \$100 must be paid in full.

*Non-Members must complete agreement prior to registration