



**Jr. Adventure Camp
2017
Registration Form
4 year olds
(Moving to Kindergarten)**

Child's Name:	
Address:	
City:	Zip:
Home Phone:	Date of Birth:
Name of Parents:	
Address (if different) :	
City:	Zip:
Home Phone:	Cell Phone:
Work Phone:	E-mail:
Current school and grade:	
Parent's location when child is at center: (Please included both parent's employers & phone numbers)	
Mother work:	Phone:
Father work:	Phone:
Alternate person to be notified in an emergency situation if parent is unavailable:	
Name and Phone #:	
Name and Phone #:	
Name and Phone #:	
Allergies / Health problems:	

**Monday - Friday ● 7:00am - 3:00pm
Tuition includes: Hot lunch, and snacks**

Week of Camp	Weekly Themes	Cost per week	Place an X for the week your child will attend	Aftercare \$50 per week Place X if needed
June 5-9	Fun at the Beach	\$150.00		
June 12-6	Willy Wonka	\$150.00		
June 19-23	Circus Time	\$150.00		
June 26-30	It's a Zoo	\$150.00		
July 3-7 Closed July 4 th	Red, White & Blue	\$150.00		
July 10-14	It's a Small World	\$150.00		
July 17-21	Adventure Island	\$150.00		
July 24-28	Under the Stars	\$150.00		

- Tuition/Aftercare Fee's will be drafted Monthly with bank information on file.
- Optional extended care 3pm-6pm \$50.00 per week.
- Sibling discounts available.
- Childcare available the week of May 30th - June 2nd
- Childcare is NOT available July 31st - August 4th

HOLY CROSS LUTHERAN ACADEMY & PRESCHOOL
Summer Camp Registration Form

TUITION, REFUND AND CANCELLATION POLICY:

- All tuition is due the Friday prior to each week the child attends our summer camp.
- A weekly tuition is required, regardless of the number of days your child attends.
- A \$25 charge will be assessed to your account for a NSF charge.
- Cancellations - all cancellations for registered weeks need to be put in writing one week before so you will not be charged.

MEDICAL AND PICTURE RELEASE:

Medical Release: Rarely do serious accidents or illness occur at Holy Cross Lutheran Academy or while traveling for school purpose: but in the event your son/daughter should need medical treatment by the school personnel or any Emergency Medical Personnel, your signature below will allow and authorize us to provide or secure such treatment without delay. In the event of a serious accident or illness you will be notified as quickly as possible.

Picture Release: From time to time Holy Cross Lutheran Academy will be taking pictures of your child to document activities at school. Some of these pictures may be used for promotion and publicity. I grant permission for HCLA to take pictures of my child, for use in school and church publications and for promotional purposes. ___ Yes / ___ No

Parent / Guardian Signature

Child's Name

Parent / Guardian name printed

Date