



St. Alphonsus School Summer Camp Registration Form
Registration begins March 1, 2019 and ends May 1, 2019

Due to limitations, no late registrations accepted

Child's Name _____

Grade (2019/20 school year)_____ Age_____ Birthdate____/____/____(Students who have completed 5th Grade are eligible this year.) ***Child must be a registered student at St. Alphonsus School OR a registered child of a St. Alphonsus Parishioner. Pre-K students must be 4 years old AND potty trained by June 3rd to attend summer camp. **Students must be 4 years old by June 3rd to attend summer camp.**

T-shirt size _____ (one t-shirt included in fees) **T-shirts must be worn on off campus field trips**

Additional t-shirts @ \$10.00 each _____

Parent's Name _____

Phone Number _____ cell _____

Address: _____

Email: _____ (please print)

Please check off the week(s) for which you are registering your child.

- _____ June 3rd –June 7th (150.00)
- _____ June 10th -June 14th (150.00) **Vacation Bible School**
- _____ June 17th -June 21st (150.00)
- _____ June 24th -June 28th (150.00)
- _____ July 1st -July 3rd **NO CAMP on Thursday, July 4th or Friday, July 5th (125.00)**
- _____ July 8th-July 12th (150.00)
- _____ July 15th –July 19th (150.00)
- _____ July 22nd-July 26th (150.00)

Cost of SAS Summer Camp:

(One time, non-refundable) \$75.00 Registration fee per student.

Tuition: \$150.00 per week **Tuition is due the Monday of each week- no exceptions.**

Amount Paid: _____ Check # _____ R'cd. By _____

Please note cancellation policy. Campers must provide own lunch. Breakfast and Snacks will be provided.

Camper Name: _____

CANCELLATION POLICY: St. Alphonsus Summer Camp has a one week cancellation policy. Failure to cancel on the Monday prior to the scheduled week will result in full payment for that week of camp, regardless of attendance. While we understand last minute plans may come up, snacks, crafts, and field trips are paid for in advance for each week. By signing below, you acknowledge that you have read, understand, and agree to the St. Alphonsus Camp Cancellation Policy.

Signature _____ Date _____

I agree that, while my child is at St. Alphonsus Summer Camp, the name, voice and /or likeness of my child may be used in news publications, audiovisuals, and other electronic transmissions issued by employees or designees of St. Alphonsus Summer Camp. These information items include, but are not limited to photographs, videotapes, live broadcasts, sound recordings, and/or electronic transmissions related to the camp day, camp activities, and /or promotional or newsworthy events St. Alphonsus Summer Camp. I waive compensation or reimbursement of any kind related to the use of the above material for myself or the minor child.

Signature _____ Date _____