

# Summer Camp Registration 2010

Child's Name/ \_\_\_\_\_  
Grade entering: \_\_\_\_\_  
2010-2011 \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Pager/e-mail address: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Pager/e-mail address: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Medications, food or other allergies, health info: \_\_\_\_\_

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## Emergency numbers/persons authorized to pick up child:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**No child will be allowed to leave with anyone other than those named above unless you call or send written permission.**

## Enrollment Agreement

1. I understand that I am obligated to pay for the weeks for which I have registered my child, regardless of any absences.
2. I agree to adhere to tuition payment policies regarding late payment charges: all fees must be paid no later than Monday or a late fee of \$5.00 will be added.
3. I agree to support the following discipline policies of SAS Summer Camp program: Every child and parent will show respect for staff members, and abide by the policies outlined of the SAS Summer Camp Handbook. A copy of this handbook will be available to parents when registration is received.
4. Inappropriate language (spoken or written), fighting, and disrespectful behavior will not be tolerated and may result in dismissal from camp without a refund.
5. I authorize SAS Summer Camp personnel to seek medical treatment for my child in case of an accident or emergency, including contacting my child's doctor and/or emergency vehicle if needed.
6. I agree to pay a \$1.00 per minute per child late fee if my child is not picked up by 5:30 p.m. Due when child is picked up.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**No forms will be accepted without a check for all registration fees.**