

Winter Park Presbyterian Preschool Summer Camp Registration Form

Name of Child _____ DOB _____ AGE _____

Parent Name _____ Email _____

Address _____

Phone # _____ Cell Phone # _____

Emergency contact person (other than parent)

Name _____ Phone #'s _____

Ages 2-5 yrs. old

Please enroll my child in the following: Hours are 9am-12 noon

<u>DATES</u>	<u>THEMES</u>
_____ June 11 th – 15 th	“A Bug’s Life”
_____ June 25 th – 29 th	“The Wonderful World of Disney”
_____ July 9 th – 13 th	“A Walk in Space”
_____ July 23 rd – 27 th	“Fun in the Sun”
_____ All Four Sessions	

Each session is \$90. If you enroll your child in all four sessions the total fee is \$340 or \$85 per week.

_____ I would like my child to attend lunch bunch. The cost is an additional \$25 per session. This **does not** include lunch except on Fridays we will order pizza. Hours for lunch bunch are 12:00 pm – 12:55 pm.

A **non refundable** deposit of \$45.00 **per session** is due at the time your child is enrolled. **This will be applied toward your camp fee with the balance due by the first day of each session.**

My child has the following allergies or special needs _____

Parent Signature _____

Date _____

Total Payment received _____

