



# Day Camp Registration Form

## INCOMING EEC 3K - GRADE 6

### Biographical and Contact Details

Name of Applicant \_\_\_\_\_

Enrolled for Grade \_\_\_\_\_ Academic Year 20 19 20 20 Male  Female  Date of Birth \_\_\_ / \_\_\_ / \_\_\_

Home Address \_\_\_\_\_

Name of Parents or Guardians \_\_\_\_\_

Parent or Guardian Phone Numbers \_\_\_\_\_ Email \_\_\_\_\_

### Authorized Pick-Up

Besides parents/legal guardians, please list the name and cell phone numbers of all authorized person(s) allowed to pick-up your child from Summer Saints Day Camp \_\_\_\_\_

### Permissions

Do you give the school permission to dispense Acetaminophen?  Yes  No

Do you give the school permission to dispense Tums/Antacid?  Yes  No

Do you give the school permission to dispense Ibuprofen?  Yes  No

Do you give the school permission to dispense Benadryl?  Yes  No

Do you give the school permission to take your child on field trips?  Yes  No

### Camp Details

**One Time Registration Fee:** \$30.00 - includes Camp T-Shirt (Mail form with registration fee to St. Paul's, ATTN: Summer Saints, 161 Dogwood Lane, Mobile, Alabama 36608. Registration fee must be included in order to process your child's registration form)

**Weekly Summer Saints:** Incoming EEC 3K - Grade 6 • \$165.00 a week for full day • \$90 a week for 1/2 day

**Summer Drop-In Days:** Incoming EEC 3K - Grade 6 • \$45 a day

- Payment is due on the first day of each week you are enrolled.
- Notify us by Friday at 5:00 p.m. of the days you will "Drop In" for the following week.
- If you need to cancel a week please notify us by Friday the week before.
- Parents need to provide lunch and one snack each day.

### Enrollment Options

**T-Shirt Size:**  Youth X-Small  Youth Small  Youth Medium  Youth Large

**Attendance:**  Weekly  Drop-In

(If attending weekly please specify weeks below)

<b>Session 2</b> (6/3 - 6/7) <input type="checkbox"/> All Day <input type="checkbox"/> 1/2 Day AM <input type="checkbox"/> 1/2 day PM	<b>Session 5</b> (6/24 - 6/28) <input type="checkbox"/> All Day <input type="checkbox"/> 1/2 Day AM <input type="checkbox"/> 1/2 day PM	<b>Session 8</b> (7/15 - 7/19) <input type="checkbox"/> All Day <input type="checkbox"/> 1/2 Day AM <input type="checkbox"/> 1/2 day PM
<b>Session 3</b> (6/10 - 6/14) <input type="checkbox"/> All Day <input type="checkbox"/> 1/2 Day AM <input type="checkbox"/> 1/2 day PM	<b>Session 6</b> (7/1 - 7/3) *closed 7/4 & 7/5 <input type="checkbox"/> All Day <input type="checkbox"/> 1/2 Day AM <input type="checkbox"/> 1/2 day PM	<b>Session 9</b> (7/22 - 7/26) <input type="checkbox"/> All Day <input type="checkbox"/> 1/2 Day AM <input type="checkbox"/> 1/2 day PM
<b>Session 4</b> (6/17 - 6/21) <input type="checkbox"/> All Day <input type="checkbox"/> 1/2 Day AM <input type="checkbox"/> 1/2 day PM	<b>Session 7</b> (7/8 - 7/12) <input type="checkbox"/> All Day <input type="checkbox"/> 1/2 Day AM <input type="checkbox"/> 1/2 day PM	<b>Session 10</b> (7/29 - 8/2) <input type="checkbox"/> All Day <input type="checkbox"/> 1/2 Day AM <input type="checkbox"/> 1/2 day PM

Please write legally binding signature below if you understand and agree to all terms and conditions of the above program.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_