

2019 John Knox Summer Camp Registration Form

(please fill out a form for each child registering- **PLEASE PRINT CLEARLY**)

Child's Name: _____ Age: _____ Birthdate _____

Address: (Street) _____

(City) _____ (State) _____ (Zip) _____

Parent Names: (Mom) _____

(Dad) _____

Phone Numbers:(Home) _____ (work) _____

(Mom Cell) _____ (Dad cell) _____

Email address:

Grade/Age *currently completed: _____ Male _____ Female _____

***NOTE: This is the group your child will be in this summer!**

Camp Costs:

9 am-1 pm Program Fees: Less than 10 days=\$28 per day, 10+ days=\$22 per day

Extended Hours=\$5 each Activity Fees listed separately

Example:

Week of-	Mon.	Tues.	Wed.	Thurs.
June 24 - 27:	9-1	8-1		8-4
July 1 - 4		9-1	9-1	(No Program)
July 8 - 11:	9-1	9-1		9-4
July 15 - 18	9-1	8-1		
July 22 - 25	9-1	9-1	8-5	
July 29 - August 1	9-1		9-2	

Example shows 8 days at normal 9-1 only (14 total days) with additional 15 hours of Extended Hours at \$5 each. Total program days- 14 at \$22 each plus additional Ext Hours at \$75 = \$383 Total

***We will also need their updated DHEC Immunization Record on file!**

Please confirm the days and times for which you wish to register. (See example above)

<u>Week of-</u>	<u>Mon.</u>	<u>Tues.</u>	<u>Wed.</u>	<u>Thurs.</u>
June 24 - 27:	_____	_____	_____	_____
July 1 - 4	_____	_____	_____	(No Program)
July 8 - 11:	_____	_____	_____	_____
July 15 - 18	_____	_____	_____	_____
July 22 - 25	_____	_____	_____	_____
July 29 - August 1	_____	_____	_____	_____

Payment Options:

Total \$ amount owed for summer program (1/2 due at registration)

Total \$ amount owed for Extended Stay (1/2 due at registration)

Total \$ amount owed for Activity Fees (Due at registration)

1. Full payment made: Date _____ Check # _____
Cash _____ Receipt # _____
2. Partial Payment #1 made: (At registration) Date _____
Check # _____ Cash _____ Receipt # _____ Still owes: _____
3. Remainder Payment #2 made: (By Thursday, July 11th) Date _____
Check # _____ Cash _____ Receipt# _____

Payment includes siblings:

Name _____ Class: _____

Name _____ Class _____

Parent Signature: _____