

WESLEY CAMP SUMMER DAYZ SUMMER 2012 PRE-REGISTRATION FORM

CHILD #1 NAME:
 (First) _____ (Last) _____

CURRENT GRADE (as of 1/1/12) _____ **School** _____

****CHILD MUST BE 6 YEARS OLD BY SEPT. 1st, 2012 and entering 1st grade in the fall of 2012**

T-Shirt Size(Circle one): Child Small(6/8) Child Med(10/12) Child Large(14/16) Adult Small Adult Med Adult Large

ALLERGIES or MEDICAL CONDITIONS _____

CHILD #2 NAME:
 (First) _____ (Last) _____

CURRENT GRADE (as of 1/1/12) _____ **School** _____

T-Shirt Size(Circle one): Child Small(6/8) Child Med(10/12) Child Large(14/16) Adult Small Adult Med Adult Large

ALLERGIES or MEDICAL CONDITIONS _____

CHILD #3 NAME:
 (First) _____ (Last) _____

CURRENT GRADE (as of 1/1/12) _____ **School** _____

T-Shirt Size(Circle one): Child Small(6/8) Child Med(10/12) Child Large(14/16) Adult Small Adult Med Adult Large

ALLERGIES or MEDICAL CONDITIONS _____

Parent(s) Name(s) _____ E-Mail _____

Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Friend/Special Request (All requests may not be honored): _____

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→Weekly Enrollment Options: Please Check One (2nd Child 10% discounted rate)

_____ 5 Days per Week **\$306.00** (\$275.40) _____ 3 Days per Week **\$282.00** (\$253.80)
 _____ 4 Days per Week **\$295.00** (\$265.50) _____ 2 Days per Week **\$208.00** (\$187.20)

→Please circle days your child will attend camp:

Monday Tuesday Wednesday Thursday Friday

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→PLEASE CHOOSE FROM ONE OF THE TWO OPTIONS BELOW:

1) _____ I am signing my child up for ALL OF THE 9 FULL WEEKS OF CAMP
 Families signing up for weeks 1-9 may take 1-vacation week and pay only ½ tuition for that week.
 Camper must be absent for one full regularly scheduled week. Weeks may not be split up or combined.

OR

2) _____ I understand that priority is given to families signing up for all full weeks 1-9, yet I would like to be considered to sign up for only the following weeks.

Families needing less than all weeks 1-9 will be admitted after the initial registration period has ended, after January 25, 2012. Based upon enrollment capacity, registration is not guaranteed.

PLEASE CHECK THE WEEKS YOU ARE INTERESTED IN YOUR CHILD ATTENDING CAMP.

DAYS OF THE WEEK ATTENDANCE MUST REMAIN THE SAME FOR ALL THE WEEKS YOUR CHILD IS ENROLLED. WEEKS MAY NOT BE SPLIT OR COMBINED.

_____ Week 1 (June 11-15)	_____ Week 6 (July 16-20)
_____ Week 2 (June 18-22)	_____ Week 7 (July 23-27)
_____ Week 3 (June 25-July 29)	_____ Week 8 (July 30- Aug 3)
_____ Week 4 (July 2-6) Closed Wednesday July 4	_____ Week 9 (August 6-10)
_____ Week 5 (July 9-13)	

******* I have enclosed the required non-refundable registration fee of \$100.00 per child AND**

******* I have enclosed the **Deposit Fee which is equal to one week's tuition per child.*******

(Deposits will be applied towards the last week for all campers).

CHECKS AND CREDIT CARDS ACCEPTED. Please call the Wesley Office at 847-729-0184 to pay by credit card.

I understand Tuition Deposits are only refundable until April 1, 2012.

I understand I am required to pay for ALL of the weeks of camp in which I have originally enrolled my child. Any changes to my child's original schedule MUST be made before May 1, 2012.

→X Parent Signature _____ Date _____