



## CAMP ENROLLMENT CONTRACT 2017

Children eligible for Bala House camp must be at least 2 years 6 months of age, toilet trained, and not older than 6 years of age. Camp registration is on a first come, first served basis. **To guarantee a space for your child, please return this form, with the \$200 nonrefundable deposit which will be applied to your child's camp tuition. Half of the remaining tuition is due 5/9/17; the total is due on 6/6/17.**

CHILD'S NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_ PHONE (H) \_\_\_\_\_ (W) \_\_\_\_\_

PARENT'S ADDRESS \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ CELL \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_ PHONE (H) \_\_\_\_\_ (W) \_\_\_\_\_

PARENT'S ADDRESS \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ CELL \_\_\_\_\_

PLEASE CIRCLE THE BOX (ES) CORRESPONDING TO THE DESIRED CAMP WEEK(S) AND SCHEDULE(S). OBTAIN A 10% DISCOUNT ON YOUR TOTAL CAMP TUITION IF YOU REGISTER FOR MORE THAN ONE WEEK PRIOR TO MAY 1<sup>ST</sup>. THE WEEKS DO NOT HAVE TO BE CONSECUTIVE.

Camp 2017 Schedules	Week 1 June 19~23	Week 2 June 26~30	Week 3 July 3 ~ 7 (closed 7/4)	Week 4 July 10~14	Week 5 July 17~21	Week 6 July 24~28	Week 7 July 31~ Aug 4	Week 8 Aug 7~11
8:30 ~12	\$ 287	\$ 287	\$ 287	\$ 287	\$ 287	\$ 287	\$ 287	\$ 287
8:30~1	\$ 320	\$ 320	\$ 320	\$ 320	\$ 320	\$ 320	\$ 320	\$ 320
8:30~3	\$ 415	\$ 415	\$ 415	\$ 415	\$ 415	\$ 415	\$ 415	\$ 415
8:30~5	\$ 474	\$ 474	\$ 474	\$ 474	\$ 474	\$ 474	\$ 474	\$ 474
8:30~5:45	\$ 502	\$ 502	\$ 502	\$ 502	\$ 502	\$ 502	\$ 502	\$ 502
Add 8 a.m. to any schedule	\$ 35	\$ 35	\$ 35	\$ 35	\$ 35	\$ 35	\$ 35	\$ 35

Afternoon nap? Yes \_\_\_\_\_ No \_\_\_\_\_

**TOTAL CAMP TUITION \_\_\_\_\_ Half of this is due 5/9/17, and the remainder is due on 6/6/17.**

All fees must be paid in full before your child will be admitted to the program. No refunds will be made for nonattendance. All new campers must have completed medical and emergency forms in the office by the first day of camp.

Bala House will provide morning and afternoon snacks, indoor and outdoor activities for the children, an optional nap time, supervised lunch (children bring lunches) and weekly art, music and gymnastics classes.

List any allergies or special dietary needs:

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Persons designated by parent to whom child may be released (include address and phone number):

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I have received complete written program information and agree to update the emergency contact/consent form whenever changes occur or at least every 6 months.

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ADMINISTRATOR'S SIGNATURE

\_\_\_\_\_  
DATE