



Summer Programming 2018 Registration

Participant _____ DOB _____ Age _____
 Parent/Guardian _____
 Address _____ City _____ Zip _____
 Telephone (Primary) _____ Telephone (secondary) _____
 Email _____ Are you applying for grant funds? Yes No

Sessions	Check weeks attending
Session 1: 6/18-6/29 \$600	
Session 2: 7/9-7/20 \$600	
Session 3: 7/23-8/3 \$600	
Session 4: 8/6-8/17 \$600	

I am aware a \$50 deposit or letter from a third party payer is required for each session I plan for my child to attend at time of registration. All deposits are due with forms to secure a spot in the program. Final and full payment must be received by May 31, 2018. A late payment fee of \$25 will be charged for payments received after May 31, 2018.

Signature: _____

Print Name: _____ Date: _____

Office use only

Total Registration Fees: _____ **Paid:** _____ **Balance:** _____