

SUMMER AT SHANNON, 2010

REGISTRATION FORM

CHILD'S INFORMATION:

Child's Name: _____ Age: _____ Birth Date: _____

*All students must have a copy of birth certificate and immunization record on file with Shannon Forest Christian School.

Emergency Telephone Number(s) _____

Grade Completed in 2009-2010 _____ Registered for 2010-2011 at SFCS? _____

Please check all that apply:

June 7-11	July 6-9 (no S@S on July 5th)
Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/>	Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/>
<input type="checkbox"/> Full Day(7:30am-5:30pm) <input type="checkbox"/> 1/2 Day(7:30am-12:30pm)	<input type="checkbox"/> Full Day(7:30am-5:30pm) <input type="checkbox"/> 1/2 Day(7:30am-12:30pm)
June 14-18	July 12-16
Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/>	Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/>
<input type="checkbox"/> Full Day(7:30am-5:30 m) <input type="checkbox"/> 1/2 Day(7:30am-12:30pm)	<input type="checkbox"/> Full Day(7:30am-5:30 m) <input type="checkbox"/> 1/2 Day(7:30am-12:30 pm)
June 21-25	July 19-23
Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/>	Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/>
<input type="checkbox"/> Full Day(7:30am-5:30pm) <input type="checkbox"/> 1/2 Day(7:30am-12:30pm)	<input type="checkbox"/> Full Day(7:30am-5:30pm) <input type="checkbox"/> 1/2 Day(7:30am-12:30pm)
June 28—July 2 (VBS)	July 26-30
Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/>	Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/>
<input type="checkbox"/> Full Day(7:30am-5:30pm) <input type="checkbox"/> 1/2 Day(7:30am-12:30pm)	<input type="checkbox"/> Full Day(7:30am-5:30pm) <input type="checkbox"/> 1/2 Day(7:30am-12:30pm)
Weekly Tuition Each Child	Weekly Tuition Each Child
Five Full Days \$130	Five Half Days \$95
Three Full Days \$90	Three Half Days \$75
Two Full Days \$80	Two Half Days \$65

UNDERSTANDING THE FINANCIAL AGREEMENT

The non-refundable enrollment fee and first week's tuition must accompany the registration form. **Registration fee: \$100 per child or \$200 max per family.**

You may pay for the entire summer by making arrangements with the Summer Camp Director. Otherwise, tuition is due the first day of each week your child will attend. There will be no adjustments if you pick your child up early or if he/she does not attend.

A fee of \$10.00 per 15 minutes late will be charged for children who are picked up later than the regular dismissal time.

There will be no refunds for absences or withdrawals. In case of emergency, you may make changes with the approval of the summer camp supervisor.

I understand that I am responsible for payment of each week that my child is registered. The cancellation or rearrangement of weeks must be received and approved by the director seven days prior. Without prior written approval, I will be responsible for my original registration.

UNDERSTANDING THE MINISTRY AND MISSION OF SUMMER AT SHANNON

I understand that the school has the right to dismiss any student for lack of cooperation with school policy by the student, parent or guardian.

I have disclosed sufficient information regarding my child's needs—emotional, social, mental, spiritual and/or physical so that the school will be effective in fulfilling its mission.

I agree to release and hold harmless the school, the agents and the employees from all claims, damages, or other liabilities, which are not the result of gross negligence by the school, its agents or employees.

I support and pledge my full cooperation to the school's mission, policies and goals (see Parent/Student Handbook). I will bring any questions, concerns or criticisms directly to the school's administration to be properly considered by those in authority.

Parent Signature

Date