



# Summer Camp Program 2024

26558 Marguerite Parkway  
Mission Viejo, Ca 92692  
949-582-5856

Camper's name: \_\_\_\_\_ DOB: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Father's Name: \_\_\_\_\_ phone #: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ phone #: \_\_\_\_\_

Best email for communication: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ phone #: \_\_\_\_\_

Allergies: \_\_\_\_\_

Please circle the dates you would like					
WK 1	Mon., June 10	Tues., June 11	Wed., June 12	Thurs., June 13	Fri., June 14
VBS Week at MVCofC June 17 – June 20: No regular Camp					
WK 2	Mon., June 24	Tues., June 25	Wed., June 26	Thurs., June 27	Fri., June 28
WK 3	Mon., July 1	Tuesday, July 2	Wed., July 3	CLOSED	CLOSED
WK 4	Mon., July 8	Tues., July 9	Wed., July 10	Thurs., July 11	Fri., July 12
WK 5	Mon., July 15	Tues., July 16	Wed., July 17	Thurs., July 18	Fri., July 19
WK 6	Mon., July 22	Tues., July 23	Wed., July 24	Thurs., July 25	CLOSED

Early drop off available from 8:00am – 9:00am. \$10 extra per day. Please list days early drop off is needed \_\_\_\_\_

<p><b>Price Per Day Per Child</b></p> <p>1-5 days - \$50 a day 6-10 days - \$45 a day 11 or more days - \$40 a day</p>
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Total number of days: \_\_\_\_\_

Price per day: \_\_\_\_\_

Registration fee: \_\_\_\_\_

Total amount charged: \_\_\_\_\_

## Enrollment Requirements

All Campers must be at least 2 years 9 months and potty trained. No diapers or pull-ups are allowed. All paperwork, including shot records and a physician's report are due before attendance can begin.

## Registration Fee:

There is a one-time non-refundable registration fee per family due at time of registration  
\$30 without t-shirt  
\$40 includes t-shirt

## Camp Fees and Days are Non-refundable and Non-transferable:

We are required by law to have a specific staff to student ratio. Thus, the need to know the exact number of students attending before each day. We ask that you sign up for your camp days at least 24 hours in advance.

I, \_\_\_\_\_ agree to all terms in this agreement. Including  
camp fees and non-refundable days.

Signature of parent/guardian \_\_\_\_\_ date \_\_\_\_\_

Are you a previously enrolled student: \_\_\_\_\_ if yes, prior teacher \_\_\_\_\_

How did you hear about our Camp? \_\_\_\_\_

Does your child have health or physical conditions we should be aware of? \_\_\_\_\_

Are there legal custody arrangements that we should be aware of? \_\_\_\_\_