

Covenant Developmental Preschool – Summer Camp

Registration Form 2019

Week 1: June 10th-13th

Week 2: July 8th-11th

I hereby make application for admission of my child to Covenant Developmental Preschool “Camp Covenant” and submit the following data for your information:

Child’s full name _____

Name to call child _____ Child’s Social Security Number _____

Present age _____ Date of Birth _____ Boy _____ Girl _____

Address: _____

Has your child previously attended another program or playgroup? Yes _____ No _____ Name of program _____

Doctor _____ Phone Number _____

Emergency Contact/Parent Information:

Father: _____ Employer: _____

Cell Number: _____ Work Number: _____

Mother: _____ Employer: _____

Cell Number: _____ Work Number: _____

Are both parents legally able to pick up child? Yes _____ No _____

Other persons authorized to pick up child:

Name: _____

Relationship _____

Phone: _____

Other persons authorized to pick up child:

Name: _____

Relationship _____

Phone: _____

****A physical within the last 12 months is required to attend Camp Covenant.****

Payment of \$88 for each week checked above must accompany this application to be enrolled in the camp program. Checks should be payable to Covenant Preschool.

****Checks will be deposited at the start of the camp week.****

I understand that a child who is enrolled in summer camp is to be enrolled for the entire week of any session. In the event of withdrawal the camp fees are nonrefundable. In the event of dismissal from the camp program, there is no refund.

Signed: _____ Date: _____