

SUMMER



CAMP!



GECC Camp Registration Form – Due February 26th, 2018 (reg. only – not tuition)

Name of Child: _____ Age: _____ DOB: ____/____/____

Parent or Guardian Names: _____

Address: _____

Home Phone: _____ Cell: _____

Email: _____ Before Care hours: 7am-9 am Camp hours: 9am-3pm

Check the before care days and camp weeks your child will attend:

Before Care: \$20 per day	Camp Weeks: \$175 per week
<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F	<input type="checkbox"/> June 18-22- Under the Sea Week
<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F	<input type="checkbox"/> June 25-29- Rainforest Week
<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F	<input type="checkbox"/> July 2,3,5 & 6- America the Beautiful Week
<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F	<input type="checkbox"/> July 9-13- Space Week
<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F	<input type="checkbox"/> July 16-20- Dinosaur Week
<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F	<input type="checkbox"/> July 23-27- Bug Week
<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F	<input type="checkbox"/> July 30-Aug 3- Zoo Week
<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F	<input type="checkbox"/> August 6-10- Science Week
<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F	<input type="checkbox"/> August 13-17- Weather Week
<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F	<input type="checkbox"/> August 20-24- Sports Week
<i>(We provide breakfast & lunch. Parents provide snack.)</i>	

Camp Registration Fee of \$35.00 (non-refundable) – Payable to Grace Early Childhood Center

OFFICE USE ONLY

Registration Fee Received: _____ Credit Card Cash Check #: _____

Employee Signature: _____ Date: _____

****Turn over for important info****

Grace Early Childhood Center

6725 Montgomery Road Elkridge, MD 21075

Email: gracechildcarecenter1@gmail.com

Phone: 410-796-4561



Important Information for Summer Camp

- Registration form and fee due: **February 26th**
- Tuition due for all weeks registered (lump sum): **April 27th**
- Cancellations:
 - If you decide to cancel any week that has been registered and paid for, you will only be refunded half of the tuition for that week.
 - If camp has less than 8 students registered for a week that you chose, GECC will notify you of our intent to cancel that week and you will be fully refunded your \$175 for that week.
- You will receive an email of the online GECC Parent Handbook. Please read, sign and turn in the handbook receipt form.
- All forms for our campers are to be turned into the office before the start of camp.

I hereby acknowledge that I have read and understood the terms and conditions set out above.

Parent or Guardian's Signature: _____

Date: _____