

Spring Break Day Camp Registration Form

(Please make a copy of this form for each camper attending)

Camp Hours: 8:30 a.m. - 4:00 p.m.
Before Care: 8:00 - 8:30 a.m. - \$10
After Care: 4:00 - 4:30 p.m. - \$10
Daily Rate: \$34 per child
No discounts or refunds.

Camper _____

Male _____ Female _____ Date of Birth _____ Age _____ Grade _____

Parent or Guardian _____

Home Phone _____ Cell Phone _____ Work Phone _____

Address _____

City _____ State _____ Zip _____

E-mail Address _____

1. Check off each day your child will be attending camp. \$34 per day.
 2. If you are in need of Before Care (BC) or After Care (AC), please circle each needed on the appropriate days. \$10 per session.
 3. Add the registration fee plus costs for Before Care or After Care and enter the Total Due. (Before and After Care must be prepaid.)
 4. Full payment is due upon registration. Registration fees are non-refundable. Sorry, no exceptions. No-shows on registered days will not receive refund or credit.
- HEALTH/PERMISSION SLIP & AGREEMENT TO PARTICIPATE Forms must be turned in with registration. All days subject to cancellation in the event of low registration.*

Type of payment: Check Money Order Visa MasterCard

Please make Check or Money Order payable to : Howell Conference & Nature Center

Card # _____

Exp. Date _____ CVC Code (on back of card) _____

Name as it appears on Credit Card _____

Signature _____

I have read and agree to policies and procedures including tuition terms and refund policies (signature) _____

How did you hear about us? _____

DATE	ATTENDING \$34 per day	Before Care/ After Care (\$10 each)	TOTAL DUE (Day fee + BC/AC fee)
April 9		BC AC	
April 10		BC AC	
April 11			
April 12		BC AC	
April 13		BC AC	
		TOTAL DUE	