



*The Gathering Place*<sup>®</sup>



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**2009-2010**

**Summer Adventure Camp**

**Registration Form**

**PLEASE PRINT**

Name of Child \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mom's Cell \_\_\_\_\_ Dad's Cell \_\_\_\_\_

Mom's Email \_\_\_\_\_ Dad's Email \_\_\_\_\_

Child's T-Shirt Size \_\_\_\_\_ Child's Shoe Size \_\_\_\_\_

Days Your Child Will Attend:

Monday  Tuesday  Wednesday  Thursday  Friday

Hours of Care: Arrival Time \_\_\_\_\_ Departure Time \_\_\_\_\_

Is your child currently enrolled in another program at The Gathering Place? YES  NO

Do you currently have another child enrolled in The Gathering Place? YES  NO

Please enroll my child in The Gathering Place Polaris. The child care fees have been fully explained to me and I understand them. I will be financially responsible for all fees and tuition incurred. I also agree to follow all the rules set by the Center. I understand that I will be charged according to the number of days that I am registered for. I understand that the registration fee check made payable to The Gathering Place Polaris is due at the time of enrollment. I understand that it is non-refundable should I decide not to attend the Center.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

Today's Date: \_\_\_\_\_  
Date Fees & Forms Received: \_\_\_\_\_  
Enrollment Fee: \_\_\_\_\_  
Material Fee: \_\_\_\_\_  
Check #: \_\_\_\_\_  
Processed By: \_\_\_\_\_

**IN ORDER TO HOLD A PLACE FOR YOUR CHILD FOR THE 2009-2010 SUMMER ADVENTURE CAMP, COMPLETE THIS FORM AND RETURN IT ALONG WITH YOUR \$50 REGISTRATION FEE.**

**ACTIVITY FEE OF \$175 + 1 WEEK ADVANCE TUITION IS DUE BY MAY 15, 2009. ALL ISSUED FORMS ARE DUE PRIOR TO YOUR CHILD'S START DATE.**

**REGISTRATION FEE IS NON-REFUNDABLE**