

# Registration Instructions



Welcome! We are happy to have you join us this summer!

Our hours are Monday – Friday 7:30 am to 5:30 pm.

Half days are 7:30 am – 12 pm or 1 pm – 5:30 pm.

1. Complete one registration form and emergency card per child and one contract per family and submit fees to the office.
2. Fees are due no later than the Monday morning of the actual week of attendance. Children will NOT be admitted without payment.
3. Payments can be made by cash or check. Please make checks payable to Desert Chapel. Write “child’s name and summer camp dates” on memo line.

## Fees and Tuition Rates

Pay Ahead Tuition	\$100 per child for a full week if paid by 5:30 p.m. the Friday prior to the camp your child will be attending.
Tuition Options	\$125 Weekly \$ 65 Half week (1/2 day for 5 days or 3 full days) \$ 35 Daily \$ 25 Daily half day
Added Costs	Lunches and special activities or events

## Dates of Camp

## Pay Ahead Tuition Date

<b>Week 1</b> May 30 - June 2	<b>May 26</b>
<b>Week 2</b> June 5 - June 9	<b>June 2</b>
<b>Week 3</b> June 12 – June 16	<b>June 9</b>
<b>Week 4</b> June 19 – June 23 * VBS	<b>June 16</b>
<b>Week 5</b> June 26 – June 30	<b>June 23</b>
<b>Week 6</b> July 5 – July 7 * CLOSED MON/TUES	<b>June 30</b>
<b>Week 7</b> July 10 – July 14	<b>July 7</b>
<b>Week 8</b> July 17 – July 21	<b>July 14</b>
<b>Week 9</b> July 24 – July 28	<b>July 21</b>
<b>Week 10</b> July 31 – August 4	<b>July 28</b>
<b>Week 11</b> August 7 – August 11	<b>August 4</b>

\* Holidays and special events

**DESERT CHAPEL SUMMER DAY CAMP**

Student's Name \_\_\_\_\_  
(Last, First & Middle) (Nickname)

Date of Birth \_\_\_\_\_ 2017-2018 Grade \_\_\_\_\_

Male \_\_\_ Female \_\_\_ Parent's Email: \_\_\_\_\_ Student Lives With: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Street) (City) (Zip)

Father's Name: \_\_\_\_\_ Address: \_\_\_\_\_  
(Last, First) (City) (Zip)

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Address: \_\_\_\_\_  
(Last, First) (City) (Zip)

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Church Family Attends and Pastor's Name: \_\_\_\_\_

List names of alternates to whom your child may be released, who are locally available and able to transport student, if we are unable to contact parents.

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

**MEDICAL INFORMATION**

Family Physician: \_\_\_\_\_ Address: \_\_\_\_\_  
(City) (Zip)

Phone: \_\_\_\_\_

Any Special Medical Problems: \_\_\_\_\_

**MEDICAL AUTHORIZATION:** If parent or family doctor cannot be contacted and an emergency exists, the undersigned parent or guardian authorizes a representative of Desert Chapel to consent to any x-ray, anesthetic, medical or surgical diagnosis or treatment and hospital care deemed advisable and rendered by any licensed physician or surgeon, whether in his office or in a licensed hospital. This authorization is given in advance of any required care to empower a representative or official of the Summer Day Camp to give consent for such treatment as the physician may deem necessary.

\_\_\_\_\_  
Parent/Guardian Signature Date: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature Date: \_\_\_\_\_

## **Parent or Guardian Release**

The undersigned Parent/Guardian (here in after "I") understands that the students will be supervised while participating during scheduled times. DC Summer Camp will have live scanned adults in the presence of the children.

I, hereby, agree to release Desert Chapel Church and Desert Chapel Christian School and its agents, employees, volunteers, or members harmless from all actions, claims, liability, and expenses, whether known or unknown, present or future relating to or arising from or connected in any manner with the student's participating during DC Summer Camp herein.

This form must be signed and turned in along with all Summer Camp Forms no later than the first day of attendance. No child will be permitted to be dropped off unless this form has been signed and turned in to the office.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_