

Mini Adventurers Prek-Kindergarten

Mini Adventurers 8:30 AM-1:00 PM @ Water Tower (10 Pine)

CHILDREN MUST BE BATHROOM INDEPENDENT AND POTTY TRAINED

Afternoon Play Camp Prek-Kindergarten

Afternoon Play Camp 1:00 PM– 4:15 PM @ Water Tower (10 Pine)

CHILDREN MUST BE BATHROOM INDEPENDENT AND POTTY TRAINED

Participant's Name	D.O.B	Grade in 2022-2023	Age	Shirt size YS YM YL S M L	Gender	Summers at camp prior to 2022
Street Address	City	State	Zip	Days of Attendance M T W TH F		
Guardian Name (1)	Relation	Cell Phone	Work Phone	Email Address		
Guardian Name (2)	Relation	Cell Phone	Work Phone	Email Address		

In accordance with American with Disabilities Act please mark if any accommodation is needed for your child's enjoyment in our summer camp program. **YES NO** (Please Circle one) If yes, please describes any accommodation needed for your child's enjoyment in our summer camp program (Use back of form if more space is needed.)

Please speak with office staff before marking below

Office use: AW MED EF

Dates	PMT Deadline <i>Strictly enforced</i>	Mini Adventurers	Afternoon Play Camp	Office use only deposit <i>- remit to secure spot prior to deadline</i>	Office use only
Week 1 6/6-6/10	5/16	5 day <input type="checkbox"/> \$120 Flex 3 day <input type="checkbox"/> \$95	5 day <input type="checkbox"/> \$95 Flex 3 day <input type="checkbox"/> \$75	<input type="checkbox"/> \$ _____ <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 2 6/13-6/17	5/16	5 day <input type="checkbox"/> \$120 Flex 3 day <input type="checkbox"/> \$95	5 day <input type="checkbox"/> \$95 Flex 3 day <input type="checkbox"/> \$75	<input type="checkbox"/> \$ _____ <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 3 6/20-6/24	5/31	5 day <input type="checkbox"/> \$120 Flex 3 day <input type="checkbox"/> \$95	5 day <input type="checkbox"/> \$95 Flex 3 day <input type="checkbox"/> \$75	<input type="checkbox"/> \$ _____ <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 4 6/27-7/1	5/31	5 day <input type="checkbox"/> \$120 Flex 3 day <input type="checkbox"/> \$95	5 day <input type="checkbox"/> \$95 Flex 3 day <input type="checkbox"/> \$75	<input type="checkbox"/> \$ _____ <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 5 7/4-7/8 No camp 7/4	6/15	5 day <input type="checkbox"/> \$120 Flex 3 day <input type="checkbox"/> \$95	5 day <input type="checkbox"/> \$95 Flex 3 day <input type="checkbox"/> \$75	<input type="checkbox"/> \$ _____ <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 6 7/11-7/15	6/15	5 day <input type="checkbox"/> \$120 Flex 3 day <input type="checkbox"/> \$95	5 day <input type="checkbox"/> \$95 Flex 3 day <input type="checkbox"/> \$75	<input type="checkbox"/> \$ _____ <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 7 7/18-7/22	6/30	5 day <input type="checkbox"/> \$120 Flex 3 day <input type="checkbox"/> \$95	5 day <input type="checkbox"/> \$95 Flex 3 day <input type="checkbox"/> \$75	<input type="checkbox"/> \$ _____ <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 8 7/25-7/29	6/30	5 day <input type="checkbox"/> \$120 Flex 3 day <input type="checkbox"/> \$95	5 day <input type="checkbox"/> \$95 Flex 3 day <input type="checkbox"/> \$75	<input type="checkbox"/> \$ _____ <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 9 8/1-8/5	7/15	5 day <input type="checkbox"/> \$120 Flex 3 day <input type="checkbox"/> \$95	5 day <input type="checkbox"/> \$95 Flex 3 day <input type="checkbox"/> \$75	<input type="checkbox"/> \$ _____ <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 10 8/8-8/12	7/15	5 day <input type="checkbox"/> \$120 Flex 3 day <input type="checkbox"/> \$95	5 day <input type="checkbox"/> \$95 Flex 3 day <input type="checkbox"/> \$75	<input type="checkbox"/> \$ _____ <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH