

Kentwood Overnight Camp



Form online at www.kentwoodprepcommunity.com

2010 Application Form

How did you hear about our camp? _____

CAMPER INFORMATION:

_____			Male / Female	
Last Name	First Name	Middle Name	Circle appropriate gender	

Street Address				

City	State	Zip Code	Phone () ()	

Date of Birth	Summer Age	Grade entering in September		

MOTHER'S NAME

_____				Name of Business					
_____				_____					
Home Street Address				City	State	Zip	Phone () ()	Cell () ()	
_____				_____		_____		_____	
Business Street Address				City	State	Zip	Phone () ()	Cell () ()	
_____				_____		_____		_____	

FATHER'S NAME

_____				Name of Business			
_____				_____			
Home Street Address				City	State	Zip	Phone () ()
_____				_____		_____	
Business Street Address				City	State	Zip	Phone () ()
_____				_____		_____	

Who has legal custody of the camper during the time he/she is enrolled? _____

In whose care may we release the camper if parents cannot be located?

NAME >> _____ Home Phone >> _____ Business Phone >> _____

NAME >> _____ Home Phone >> _____ Business Phone >> _____

E-mail address _____

Persons NOT permitted to remove the camper: _____

MEDICAL INFORMATION

Special Health Concern/s _____

What are the symptoms? _____

What should be done? _____

MEDICATION: Permission to have Aspirin or Tylenol. YES NO Maximum per day: _____

EMERGENCY CARE: As parent/guardian, I hereby give permission to Kentwood to seek and obtain emergency medical attention for the above camper when deemed necessary by Kentwood officials, and do hereby release Kentwood from any liability resulting from such attention.

Date: _____ Parent/Guardian Signature: _____

Dates

- Week 1: Jun 21 - Jun 25
 Week 2: Jun 28 to Jul 2
 Week 3: Jul 5 - Jul 9
 Week 4: Jul 12 to Jul 16
 Week 5: Jul 19 to Jul 23
 Week 6: * Jul 26 to Jul 30

Check in time - June 20 (10am to 3pm)

Check out time - Saturday, July 24th at 5pm

** Week 6 may be offered based on demand - if so checkout date will be Saturday July 31 at 5pm - cost \$1089 to add week 6
 If you would like a 6th week, please send in payment. If week is cancelled you will be refunded the appropriate amount.*

AFTERNOON ACTIVITY SELECTION

Please indicate the camper's interests by placing a check next to each activity he/she will enjoy participating in. Although your child will effectively participate in most of these activities, they are also not necessarily guaranteed and are contingent upon demand. Indicating what the camper enjoys serves to assist us in determining the most suitable program for your child.

- | | | | | |
|---|--------------------------------------|--------------------------------------|---|------------------------------------|
| <input type="checkbox"/> Bowling | <input type="checkbox"/> Shopping | <input type="checkbox"/> Fishing | <input type="checkbox"/> Horseback Riding | <input type="checkbox"/> Beach |
| <input type="checkbox"/> Boating | <input type="checkbox"/> Canoe Trip | <input type="checkbox"/> Cycling | <input type="checkbox"/> Arcade | <input type="checkbox"/> Laser Tag |
| <input type="checkbox"/> Batting Cages | <input type="checkbox"/> Mini - Golf | <input type="checkbox"/> Park / Walk | <input type="checkbox"/> Movies | <input type="checkbox"/> Go-Carts |
| <input type="checkbox"/> Roller Skate / Blade | <input type="checkbox"/> Ice Skate | <input type="checkbox"/> Swimming | <input type="checkbox"/> Amusement Park | <input type="checkbox"/> Billiards |

RATES

5 Week Overnight Program (Includes Day Camp) -----> \$ 5,445.00

1 Week - \$2500	2 Weeks - \$3500	3 Weeks - \$4400	4 Weeks - \$4950	5 Weeks - \$5445	* 6 Weeks
Cost/week \$2500	Cost/week \$1750	Cost/week \$1466	Cost/week \$1237	Cost/week \$1089	See above

- **Registration Fee** Before 4/01/10 - \$50 After April 1, 2010 - \$150 After May 1, 2010 - \$250

- **Field Trip costs are calculated based on your child's selections of field trips as indicated above. Based on the demand for each trip, cost of trip will be determined, and calculated. The overnight camps cost does include all night activities and costs. The additional field trip costs are for afternoon field trips.**

An application fee of \$1000.00 is required to reserve a place for the camper. It is non-refundable and will be applied against the total due. All balances are due in full 3 weeks before the program commences. The total includes all expenses except for selected afternoon activities as listed above. All meals are included. Pocket money for field trips and personal expenses is not included.

Enclosed check for application (of \$1000.00) will apply to the basic fee. I agree to pay the balance at least 3 weeks before the program commences. I understand there is no refund for late arrival or early departure from camp, if camper is dismissed because of disciplinary action, if I withdraw my child from camp, if I do not use all/any of the weeks, or any reason whatsoever. I grant permission for my child to participate in any off campus trips. I also give permission to Kentwood to use its transportation on all adult supervised trips and release Kentwood from liability. I also grant the publication of any photos taken of my child during the period he/she is in attendance at Kentwood Summer Program.

Date: _____

Parent/Guardian Signature _____

Please turn over form and fill out other side of page.

** Upon receipt of a signed application form and deposit, Kentwood will mail out additional forms for completion by parents or guardians, as well as more information pertaining to the camp schedule, activities, field trips etc.

Kentwood Preparatory
 4650 SW 61st Avenue Fort Lauderdale, Florida 33314
 P: 954-581-8222 F: 954-797-0700
 www.kentwoodprepcommunity.com
 Copyright © 2010 Kentwood Preparatory School | All Rights Reserved