

Kentwood Summer Programs

Application Form 2010



Select Program

 Day Camp

 Young Adult Camp

 CIT / Jr Counselor

How did you hear about our camp? _____ Form available online at www.kentwoodprepcommunity.com

Camper Last Name _____ First Name _____ Middle Name _____ Male / Female
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 >> _____

E-mail address _____

Persons NOT permitted to remove the camper: _____

MEDICAL INFORMATION

Special Health Concerns _____

What are the symptoms? _____

What should be done? _____

MEDICATION: Permission to have Asprin 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 who when deemed necessary by Kentwood officials, and do hereby release Kentwood from any liability resulting from such attention.

Date: _____

Parent/Guardian Signature: _____

WILL ATTEND

Week 1: Jun 21 - Jun 25, 2010
 Week 4: Jul 12 - Jul 16

Week 2: Jun 28 - Jul 2
 Week 5: Jul 19 to Jul 23

Week 3: Jul 5 to Jul 9
 Week 6: * Jul 26 to Jul 30

* - Based on demand and school year schedule

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"/> SOCCER | <input type="checkbox"/> GEN. SPORTS | <input type="checkbox"/> ART | <input type="checkbox"/> SWIMMING | <input type="checkbox"/> VOLLEYBALL |
| <input type="checkbox"/> BASKETBALL | <input type="checkbox"/> AEROBICS | <input type="checkbox"/> WATER SPORTS | <input type="checkbox"/> VIDEO GAMES | <input type="checkbox"/> ARCHERY |
| <input type="checkbox"/> SOFTBALL | <input type="checkbox"/> PING-PONG | <input type="checkbox"/> PUPPETRY | <input type="checkbox"/> COMPUTER GAMES | <input type="checkbox"/> ACADEMIC GAMES |
| <input type="checkbox"/> MUSIC | <input type="checkbox"/> DRAMA | <input type="checkbox"/> PHOTOGRAPHY | <input type="checkbox"/> FRISBEE GOLF | <input type="checkbox"/> COOKING |
| <input type="checkbox"/> CLUBS | <input type="checkbox"/> WRESTLING | <input type="checkbox"/> BUSINESS | <input type="checkbox"/> TENNIS | <input type="checkbox"/> FASHION |

Per Week Rates

	Day Camp	Yng Adult	CIT / Jr. C **
If camper attends 6 weeks -	\$ 300.00	\$ 350.00	\$ 375.00
If camper attends 5 weeks -	\$ 325.00	\$ 375.00	\$ 400.00
If camper attends 4 weeks -	\$ 325.00	\$ 375.00	\$ 400.00
If camper attends 3 weeks -	\$ 325.00	\$ 375.00	\$ 400.00
If camper attends 2 weeks -	\$ 325.00	\$ 375.00	\$ 400.00
If camper attends 1 week -	\$ 400.00	\$ 450.00	\$ 475.00

**Paychecks are made each week to CIT's and Jr. Counselors based on job performance.

- Field trips are \$25.00 per week
- Registration fee after March 15 -- \$75.00
- Registration fee after April 15 -- \$125.00

An application fee of \$325.00 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 due does not include transport, lunch, drinks, field trips, and individual tutoring if requested (math and reading, speech/language therapy, perceptual motor training)

Enclosed check for application (of \$325.00) 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. I understand that there is no camp on July 4th, in observance of Independence Day.

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

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www.kentwoodprepcommunity.com

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