

Hillsborough Summer Camp – Full Day Program

Registration Form

(Please fill out a separate registration form for each camper)

Campers Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Telephone: (____) _____ Grade (as of 06/12): _____ Sex: M / F

Father's Name: _____ Business Phone: (____) _____

Mother's Name: _____ Business Phone: (____) _____

Emergency contact: (in the event a parent can not be reached)

Name: _____ Relationship: _____

Home Phone: (____) _____ Business Phone: (____) _____

Email: _____

Please Note: By completing this form, I understand and I am responsible for the monies due in full for the weeks and programs I signed up for and there will be no refunds after June 1, 2012.

Please circle each week attending	1	2	3	4	5	6	7	8	9	Totals Weeks
Start Dates	6/25	7/2	7/9	7/16	7/23	7/30	8/6	8/13	8/20	_____

Camp Costs

Prior to 6/1/2012	\$195	\$375	\$550	\$725	\$900	\$1,075	\$1,250	\$1,425	\$1,600	_____
After 6/1/2012 add \$50.00 per week										+

Early Drop off (6 am – 8 am)	Number of weeks	_____	X	\$20	_____	+
Late Pick-up (4:15 pm – 6 pm)	Number of weeks	_____	X	\$25	_____	+
Swim Lessons	Number of weeks	_____	X	\$40	_____	

Please circle trips Attending	1	2	3	4	5	6	7	8	9		
Cost per trip	\$35	N/C	\$35	\$35	\$35	\$35	\$35	\$35	\$35	_____	+

Registration Fee (per child)	\$25	+
\$200 non-refundable deposit (for each child due at registration)	_____	-

Balance Due by June 1, 2012: _____ =

By filling out this form I understand that I am obligated to pay the balance due in full and that there are no refunds.

Signature _____