

ShIPLEY Summer Enrichment Camp 2010 Application

Please check which programs your child will attend and what weeks he/she will be attending.

_____ **Summer Enrichment Camp** 9 a.m. – 3 p.m.

_____ June 14 – June 18

_____ June 21 – June 25

_____ June 28 – July 2

_____ July 5 – July 9

_____ July 12 – July 16

_____ July 19 – July 23

_____ **Extended Camp Care** 3 p.m. – 6 p.m.

_____ 1 day/week

_____ 2 days/week

_____ 3 days/week

_____ 4 days/week

_____ 5 days/week

Fees: (A two-week minimum is required)

Full Season	\$ 1480.00
Five Weeks.....	\$ 1300.00
Four Weeks.....	\$ 1100.00
Three Weeks.....	\$ 880.00
Two Weeks.....	\$ 620.00
Extended Camp Care (per hour)	\$ 8.00

A non-refundable deposit of \$100.00 is due with the application. The balance is due no later than May 15. Enrollment cannot be guaranteed if payment is received after May 15. No refunds will be granted after June 1.

Please send application and deposit to:

Terri Grossman
2121 Greenbrier Drive
Villanova, PA 19085

Make checks payable to "ShIPLEY Enrichment Camp."

For more information, contact Terri Grossman at (610) 527-5022 or at tgrossman@shipleyschool.org.

Your Initials _____

ShIPLEY Summer Enrichment Camp 2010 Application

Applicant's First Name _____
Applicant's Middle Name _____
Applicant's Last Name _____

Sex (check one) Male Female
Birthdate _____

Grade Entering in 2010 _____
School _____

Home Address _____
City, State, ZIP _____
Home Phone _____
Email _____

Father's Name _____
Occupation _____
Business Phone _____ Cell _____

Mother's Name _____
Occupation _____
Business Phone _____

Family Physician _____
Phone _____ Cell _____

Emergency Contact
(other than parent) _____
Phone _____

Please note any health problems or family circumstances which would require special attention:

I wish to enroll my son or daughter in the Shipley Summer Enrichment Camp. I understand that The Shipley School does not assume responsibility for accidents or medical and dental injuries received as a result of participation in these programs.

Signature of Parent or Guardian

Date

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