



THE APPLETREE SCHOOL – 2017 SENSE-A-TIONAL Summer Camp



Enrollment Contract

Camper's Name _____ Camper's Preferred Nickname _____
 Birth date ____/____/____ Male _____ Female _____
 Name & SSN of person responsible for payment _____
 (must match signature at bottom)

Address _____
 Home phone _____ Work phone _____ Cell phone _____
 Family email(s) Print NEATLY _____, _____

Camp Registration and Tuition:

Preschool and Academy – Registration \$45.00/week or for all 10 weeks \$350.00 Check the grade enrolled for the 2016-2017 school year.
 3 year old _____ 4 year old _____
 5 days: 9am-3pm - \$300.00/week (preschool only) _____ 5 days: 7am-6pm - \$345.00/week _____

Kindergarten _____ First Grade _____ Second Grade _____ Third Grade _____ Fourth Grade _____
 5 days: 7am-6pm - \$345.00/week (*Week 10: \$205.00)

New Preschool and Academy Campers: Please circle the weeks desired below.

Week 1: June 19 Week 2: June 26 Week 3: July 3 (closed 7/4) Week 4: July 10 Week 5: July 17
 Week 6: July 24 Week 7: July 31 Week 8: August 7 Week 9: August 14 *Week 10: Aug. 21-23

Camp T-Shirt Information:

Please circle T-shirt size: Child: 4T X-Small Small Medium Large
 Adult: Small Medium Large X-Large Please indicate how many shirts required. _____

The size you order will be the size you receive! One T-shirt cost is \$20.00. If your camper will register for all 10 weeks, one T-shirt is included with your registration payment. Office: T-shirt(s) PAID _____(Date)

Please read and sign below:

- If my camper is new to The Appletree School, a copy of the birth certificate/passport/adoption agreement must be provided before the 5th day of attendance.
- **Academy and Preschool: Tuition is due for summer camp by May 1, 2017, June 1, 2017 or on a weekly basis with a deposit. Please see reverse for details. The camper's name needs to be written on the check. A receipt must be requested if it is needed for tax purposes.**
 _____(initial here)
- The Appletree does not make any refunds on the registration fee that must be paid with this contract.
- My child has permission to participate in all scheduled school activities and field trips during camp.
- The Appletree is authorized to obtain medical treatment for my child if, in the opinion of the staff, such treatment is necessary and the parent(s)/guardian cannot be reached for the appropriate consent. The parent(s)/guardian agree to be responsible for all charges or expenses connected with such treatment.
- I will complete the emergency form -- which will be sent home along with the Camp Calendar, before the start of camp -- and return it to Appletree School no later than the first day my child attends camp -- **making sure I indicate the names and phone numbers of at least TWO emergency contacts.**
- **If my child is new to The Appletree School, I will have my child's physician or current school fax or forward the required School Entrance Health Form showing he/she has had the required physical examination and immunizations ON or BEFORE his/her fifth day of camp attendance.**
- **If my child is new to The Appletree School, I will access the Parent Handbook online and adhere to the policies outlined in it. To the Shutterfly site use this link: <http://theappletreeschoolinfairfax.shutterfly.com>. By visiting this site you must request access and an administrator will grant you.**

Parent/Guardian Signature* _____
 (*This signature is required in order for your child to be enrolled, and implies agreement with all items above.)

For Office Use Only:

Birth Certificate/Passport # _____ Initial _____ Date _____ cont. →

Parent's Name _____ Camper's Name _____

Tuition Payment Information

- Please note tuition is due for all Academy Summer Campers and new Preschool Summer Campers by June 1, 2017.
- If you register your child after June 1, 2017 then tuition is due upon registration.
- If you are an Academy Summer Camper and you pay by May 1, 2017 you will receive a 2 % discount on the weekly tuition.
- Please remember your registration fee is due upon registering, no discount is given.
- Should you withdraw with 14 day notice in writing, you will be refunded 50% of the weekly tuition. Less than 14 day notice will result in no refund.

Please select your payment option below:

_____ Pay by May 1, 2017 – Receive 2% discount

_____ Pay by June 1, 2017 – Pay full tuition total. Failure to pay by June 1st results in child being withdrawn from registered weeks.

_____ Pay Weekly – Pay weekly on Monday(s) of attending week(s), additional \$10.00 convenience fee added to weekly tuition and a \$200.00 deposit will be due at registration which will be applied to last registered week of tuition.

_____ Pay at the time of registration (after June 1, 2017) – Pay full tuition total.

Academy Weekly Amount: (7am-6pm) Weeks 1-9 \$345.00, Week 10 \$205.00
Preschool Weekly Amount: (7am-6pm) Weeks 1-9 \$345.00, Week 10 \$205.00
(9am-3pm) Weeks 1-9 \$300.00, Week 10 \$180.00

I have read the payment terms and conditions and agree to the contract.

Parent /Guardian Signature _____

Date _____