



**2012
 Summer Adventure Camp
 Registration Form**

PLEASE PRINT

Name of Child _____ Date of Birth _____ Gender _____

Mother's Name _____ Father's Name _____

Home Address _____ City _____ State _____ Zip _____

Mom's Cell _____ Dad's Cell _____

Mom's Email _____ Dad's Email _____

Child's T-Shirt Size _____ Child's Shoe Size _____

Days Your Child Will Attend:

Please see the attached schedule to select the days that your child will attend Summer Adventure Camp.

Is your child currently enrolled in another program at The Gathering Place? YES NO

Do you currently have another child enrolled in The Gathering Place? YES NO

Please enroll my child in The Gathering Place Polaris, Summer Adventure Camp Program. The camp fees have been fully explained to me and I understand them. I will be financially responsible for all fees and tuition incurred. I understand that I will be charged according to the number of days that I am registered for. I understand that a rate will be prepared for me based on the days that I select and that I will pay monthly through the ACH program. I also agree to follow all the rules set by the Center. I understand that the registration fee check made payable to The Gathering Place Polaris is due at the time of enrollment. I understand that it is non-refundable should I decide not to attend the Center.

Signature _____

Date _____

<p>FOR OFFICE USE ONLY</p> <p>Today's Date: _____</p> <p>Date Fees & Forms Received: _____</p> <p>Enrollment Fee: _____</p> <p>Material Fee: _____</p> <p>Check #: _____</p> <p>Processed By: _____</p>
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<p>IN ORDER TO HOLD A PLACE FOR YOUR CHILD FOR THE 2012 SUMMER ADVENTURE CAMP, COMPLETE THIS FORM AND RETURN IT ALONG WITH THE REGISTRATION FEE OF \$50.</p> <p>REGISTRATION FEE IS NON-REFUNDABLE</p>
