



2023

## Six Weeks of Themed Activities!

June 5-9 • Under the Sea

June 12-16 • Pirates & Princesses/Treasure Hunters

June 19-23 • Wild Animal Adventures/Jungle Explorations

June 26-30 • Fairy Tales/Enchanted Forest

**July 3-7 • Closed/No Camp This Week**

July 10-14 • Lost in Space/The Solar System

July 17-21 • Nature/Camping Adventures

## General Summer Camp Information

Summer camp hours are 9:00 a.m.-1:00 p.m. with the option for extended day until 3:30 p.m. Children ages 2 years (must be 2 years old by June 1) to rising Kindergarten students will be accepted on a first come first serve basis. Tuition is \$200.00 per week and extended day is \$85.00 per week. Space is extremely limited. Sign up early to secure your child's spot!



# Summer Camp 2023 Registration Form

Please plan carefully as all summer camp payments are non-refundable and the 50% deposit must be paid to secure your spot each week. Balances must be paid in full by June 1, 2023.

Child's Name: \_\_\_\_\_

Current Class at WPPP: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Indicate Weeks Attending	Session	Dates	Weekly Tuition Amount	Add 3:30 Extended Day if Needed	TOTAL DUE	50% Deposit (Due with Registration Form)	BALANCE DUE BY JUNE 1
	1	June 5-9	\$200.00	\$85.00	\$	- \$	\$
	2	June 12-16	\$200.00	\$85.00	\$	- \$	\$
	3	June 19-23	\$200.00	\$85.00	\$	- \$	\$
	4	June 26-30	\$200.00	\$85.00	\$	- \$	\$
	<b>CLOSED</b>	July 3-7					
	5	July 10-14	\$200.00	\$85.00	\$	- \$	\$
	6	July 17-21	\$200.00	\$85.00	\$	- \$	\$
<b>TOTALS</b>			\$	\$	\$	- \$	\$

Parent or Legal Guardian Name: \_\_\_\_\_

Parent or Legal Guardian Signature\*: \_\_\_\_\_

*\* Signature indicates acknowledgement that all summer camp payments are non-refundable.*

Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Emergency Contact #1: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Emergency Contact #2: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Emergency Contact #3: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Preschool Office Use Only

**Class Placement:** Twos \_\_\_\_\_ Threes \_\_\_\_\_ Fours \_\_\_\_\_ Rising K \_\_\_\_\_

**Up-to-Date Health Forms on File:** Yes \_\_\_\_\_ No \_\_\_\_\_ Request \_\_\_\_\_

**Date Received** \_\_\_\_\_ **Amount Paid** \_\_\_\_\_ **Check #** \_\_\_\_\_