	Sanlando 023 Summer Hours: M-TI Cost:	Camp Reg	gistration F 1:30 pm*		
<del>ా</del> ర జారా	Child Info	rmation			
Child's Name:			Birthdate	:	
Address:			G	ender: 🛛 M	ΠF
	Family Info	ormation			
Mother/ Guardian Name:		ather/ Juardian Name:			
Primary Phone:	Р	rimary Phone: _			
Secondary Phone:	S	econdary Phone:			
Employer:	E	mployer:			
Email:	E	mail:			
Additional Contacts (Persons allo Name & Number: Name & Number:					
	Medical Inf	ormation			
Doctor's Name:			Phone:		
Allergies or Medical Conditions:					
Please select the weeks your chi	ld will attend:				
<ul> <li>June 12-15 - Camping Expedition</li> <li>June 19-22 - Ooey Gooey Science</li> <li>June 26-29 - Kitchen Creations</li> </ul>		<ul> <li>July 10-13 - Pet Vet Venture</li> <li>July 17-20 - Rainforest Explorers</li> <li>July 24-27 - Construction</li> </ul>			
*I need extended care till 4 pm: (Extended care may be a		No 60 per week if si	ix or more childre	en are register	ed)
<b>Tuition Due Dates:</b> (TE will be run June camps = May 25 July camps = July 7	ı on due dates)	How will you		□ Chec	k
	Office Us	e Only			
Amount Paid: SCS Age Level:	□ TE run date: _ □ Acknowledgme	□ C ent signed □ R		eck# ned	