

DISCOVERY SUMMER CAMP REGISTRATION FORM

Child's Name _____ **Birthdate** _____
Address _____
City _____ **State** _____ **Zip** _____
Home Phone () _____

Mother's Name _____ **E-Mail** _____
Work Phone () _____ **Cell Phone** () _____
Work Address _____

Father's Name _____ **E-Mail** _____
Work Phone () _____ **Cell Phone** () _____
Work Address _____

Camp hours are 7:00 a.m. to 6:00 p.m., with drop-off before 9:00 a.m. and pick-up after 3:00 p.m.

	Please indicate the weeks your child will be enrolled in camp.		AMOUNT DUE
_____	June 21 – 25	\$180.00	_____
_____	June 28 – July 2	\$180.00	_____
_____	July 6 – 9	\$144.00	_____
_____	July 12 – 15	\$180.00	_____
_____	July 19 – 23	\$180.00	_____
_____	July 26 – 30	\$180.00	_____
_____	August 2 – 6	\$180.00	_____
_____	August 9 – 13	\$180.00	_____
_____	August 16 – 20	\$180.00	_____
_____	August 23 – 27	\$180.00	_____
_____	August 30 – September 3	\$180.00	_____
TOTAL AMOUNT DUE			_____

Check # _____

There is a non-refundable \$25 fee for any camp cancellation. Make checks payable to Discovery Day Care. Send enrollment forms and payment information to Discovery Day Care, 74 N. Pennsylvania Avenue, Morrisville, PA 19067. Enrollment will be confirmed via e-mail.

Registrant/Parent Signature _____ **Date** _____