Preschool Summer Camp 2024

<u>Preschool Summer Camp – Sport Theme -June 24-28 (9 am to 1 pm – bring lunch)</u> Payment: Non-refundable half due at registration – Balance due on first day of camp.

Registration Deadline: June 10 (may check after this date for availability)

☐ 3 months-24 months (Age as of June 1, 2024) Due to State Regulations can only attend 2 days a week: Thursday & Friday	$\ \square$ 2-year-olds $-$ K5 (Age as of June 1, 2024 $-$ 3 year-olds and up must be potty-that Attends all 5 days	rained)		
Cost: \$90.00	Cost: \$145.00			
Payment: Non-refundable ha	Camp-July 8-12 (9 am to 1 pm – bring lunch) due at registration – Balance due on first day of camp. June 24 (check after this date for availability)			
☐ 3 months-24 months (Age as of June 1, 2024)	\square 2-year-olds - K5 (Age as of June 1, 2024 – 3-year-olds and up must be potty-trained)			
Due to State Regulations can only attend 2 days a week: Thursday & Friday	Attends all 5 days			
Cost: \$90.00	Cost: \$145.00			
	ent enrollment and staffing. *After Registration Deadline call office for registration deadline if number of students has been reached.	availability.		
Child's Full Name What name does your child go by?	Date of Birth			
What name does your child go by?	□ Female □ Male			
Street Address	Primary Number			
City S	ate Zip Code			
Mailing Address, if different				
Email Address				
	Yes – Where?			
Potty-Trained □Yes □No				
Father's Name	Mother's Name			
Home Address	Home Address			
(If different from student)	(If different from student)			
Place of Employment & Address	Place of Employment & Address			
Business Phone	Business Phone			
Cell Phone	Cell Phone			
Parent's Relationship to each other: Married	□Divorced □Separated □Single			
Child lives with: Both Parents Mother	□Father □Other (List relationship)		
Do you have a church home? □ No □ Yes				

Emergency Contacts and Pickup (other than parents): Please list legal names so identification can be checked.

NameAddressPhone Number(s)Relationship to child		Name	NameAddress Phone Number(s) Relationship to child				
		Address					
		Phone Numb					
		Relationship					
Nam	e		Name				
Phone Number(s)							
			Phone Number(s) Relationship to child				
Relationship to child							
I agr	ee to follow the policies of I	Preschool Summ	ner Camp.				
I give	e permission for my child to	go on walking f	field trips during Preschool Sum	mer Camp.			
I oiva	e permission for my child to	he oiven medici	al treatment in the event of an e	meroency			
1 8000	permission for my child to	be given mearer	an ireaiment in the event of an el	nergeney.			
Date			Parent Signature				
Duie.			I arem signature				
		No	otice of Nondiscriminatory Policy as t	o Students			
The Fin	rst Baptist Church of Monroe Preschool S	ummer Camp admits st	tudents of any race, color, national and ethnic or	igin to all the rights, privileges, progran	ns, and activities generally accorded or made		
availab	le to students at the school. It does not disc	riminate on the basis of	race, color, national and ethnic origin in admini	stration of its educational policies, admi.	ssions policies, and other school-administered		
program	2.						
Г							
Office Use Only							
	<u>Preschool Summer Camp - June</u>						
			Check Number				
	Final Payment	Date	Check Number	Cash			
	Preschool Summer Camp - July						
	Registration Paid	Date	Check Number	Cash			
I							