

Language Garden Summer Camp

Ages 2-5 Years July 29th - Aug 16th 2024

Child's Name _____ Birth Date _____ () Male () Female
Age of student Aug 1st Years _____ Months _____ *Note: Child must be 2 years old*
Main Address 1 _____ City _____ Zip _____
Secondary Address _____
Is your child potty-trained? () Yes () No () In process: _____ % there
Does your child have siblings at home? () Yes Ages _____ () No

Mother's/Guardian#1 Name _____
Phone # _____ Text at this # () yes () no
Employed By _____
Primary Email _____

Father's/ Guardian #2 Name _____
Phone # _____ Text at this # () yes () no
Employed By _____
Primary Email _____

—> **Book BEFORE June and Save! Book before June 1st and take \$100 off!**

Full Day Session 8:30am-5pm

() Plan A – Five days M-F () 3 weeks \$1460. () 2 weeks \$1070 () 1 week \$550
() Plan B – Three days M,W,Th () 3 weeks \$890 () 2 weeks \$340

AM Session 8:30am -12:30pm

() Plan C – Five ½ days () 3 weeks \$1140 () 2 weeks \$845 () 1 week \$460

May we have your permission to use photos of your child for our website and PR? () yes () no

Two Ways to Pay



() In full () 50% with enrollment, 50% paid by June 1st.
Payment (full / 50%) must be included with your enrollment paper

Payment can be made via:

Venmo @lgps2 or check (Language Garden Preschool)

Email camp enrollment forms to: admin@languagegardenpreschool.com

CANCELLATION REFUND POLICY.

As there are limited spaces and we are holding a place for your child, if you need to cancel your child's camp week(s), we ask for written notice by email to admin@languagegarden-preschool.com 30 days prior to the first day of camp.

Every camp session is different, and we anticipate an uneventful summer. However, if due to unforeseen circumstances, the school cancels summer camp, families will receive 100% refund. If parents withdraw, refunds are as follows:

- By May 1st: 100% returned
- May 2nd - 15th: 75% returned
- May 16-30th: 50% returned
- After May 30th: No refund

LATE PICK-UP CHARGE

The hours of the Summer Camp are 8:30am - 12:30pm / 5:00pm. Pick-up **after your child's scheduled pick-up time will result in a late fee of \$10/per every 5 minutes will be charged. Late fees not paid within the week will be charged to your Credit Card _____ Initials**

CC# _____ Exp Date _____ Sec code _____ Zip _____

() I have read the above information, and I understand and accept all the terms in the summer camp fees, refunds and enrollment agreement.

Name (please print) _____

Signature _____ Date _____

Staff/Admin: Summer Camp Form Received: Date _____

Summer Camp Enrollment Fee Received: Date _____ \$ _____