

SHADOW HILLS SUMMER CAMP

FINANCIAL AGREEMENT



CHILD'S NAME: _____ **DOB:** _____

Camp hours are 7:30 am to 5:30 pm. Drop-off times are from 7:30am - 9:00am.

Specific information will be sent out on May 12th regarding dress code, field trips, staffing, lunch menu, and the handbook.

ENROLLMENT: FEES & SCHEDULE

**All Enrollment Fees are NON-Refundable*

Registration Fee	<input type="checkbox"/> \$125 per camper	<i>Due June 1st</i>
Three Week's Tuition <i>*Required for full-time and 3-day schedules only</i>	<input type="checkbox"/> \$600 full-time <input type="checkbox"/> \$495 3-days	<i>Due June 1st</i>

WEEKLY TUITION – DUE AND PAYABLE EACH MONDAY BY 9AM

1 ST -8 TH GRADE DAY DROP-IN FEE			
1 ST -8 TH GRADE WEEKLY TUITION			
Daily Drop-In Fee	<input type="checkbox"/> \$70		
Week of Attendance	FULL TIME	3 DAYS	2 DAYS
• June 5 th – 9 th	<input type="checkbox"/> \$200	<input type="checkbox"/> \$165	<input type="checkbox"/> \$120
• June 12 th – 16 th	<input type="checkbox"/> \$200	<input type="checkbox"/> \$165	<input type="checkbox"/> \$120
• June 19 th – 23 rd (closed June 19 th)	<input type="checkbox"/> \$200	<input type="checkbox"/> \$165	<input type="checkbox"/> \$120
• June 26 th – 30 th	<input type="checkbox"/> \$200	<input type="checkbox"/> \$165	<input type="checkbox"/> \$120
• July 3 rd – 7 th (closed July 4 th)	<input type="checkbox"/> \$200	<input type="checkbox"/> \$165	<input type="checkbox"/> \$120
• July 10 th – 14 th (VBS 9am-12:30pm)	<input type="checkbox"/> \$200	<input type="checkbox"/> \$165	<input type="checkbox"/> \$120
• July 17 th – 21 st	<input type="checkbox"/> \$200	<input type="checkbox"/> \$165	<input type="checkbox"/> \$120
• July 24 th – 28 th	<input type="checkbox"/> \$200	<input type="checkbox"/> \$165	<input type="checkbox"/> \$120

Tuition is due & payable EACH MONDAY BY 9AM THE WEEK of my child's attendance. *If tuition is not paid by 5pm on Monday, your child may not attend camp the remainder of the week.*

In signing, I have read, understand, and agree to abide by the camps' Financial Agreement. I agree to pay the non-refundable registration fees, as well as my child's weekly tuition:

PRINT: Parent/Guardian

SIGNATURE: Parent/Guardian

Date

OFFICE USE ONLY:

Date Applied to Billing: _____	Staff: _____
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