

Husky House Kindergarten Readiness Camp Summer 2018 Registration DAILY OPTION

(extended care may not be available)

Child's Name _____ Grade in '18-'19 School Year _____ Guardian Name _____
 Address, City, Zip _____ Phone _____ Email _____



Daily Rate 1-4 days	Core Hours 9:00 - 3:00
	\$69/day

	Monday	Tuesday (added fee)	Wednesday (added fee)	Thursday (added fee)	Friday	Weekly Fee
Dates & Theme Book	9:00 - 3:00	9:00 - 3:00	9:00 - 3:00	9:00 - 3:00	9:00 - 3:00	
June 11 - 15 The Lost Lunch		special visitor	Off-site Field Trip	inflatable jump or slide		
June 18 - 22 First Day, No Way!		special visitor	Off-site Field Trip	inflatable jump or slide		
June 25 - 29 The Missing Monster Card		special visitor	Off-site Field Trip	inflatable jump or slide		
July 2 - 6 The Cat That Disappeared		special visitor	Closed	inflatable jump or slide		
July 9 - 13 Bus Ride Bully		special visitor	Off-site Field Trip	inflatable jump or slide		
July 16 - 20 The Amazing Crafty Cat		special visitor	Off-site Field Trip	inflatable jump or slide		
July 23 - 27 Clues in the Attic		special visitor	Off-site Field Trip	inflatable jump or slide		
July 30 - August 3 Morning Mystery		special visitor	Off-site Field Trip	inflatable jump or slide		
August 6 - 10 The Shark in the Library		special visitor	Off-site Field Trip	inflatable jump or slide		

SUB-TOTAL: _____

2nd or 3rd sibling, equal or lower in fees than the first child, deduct a 10% Sibling Discount: **sibling discount:** - _____

Added enrichment = \$12.50/day **Tuesday and Thursday Added Enrichment fees:** #days _____ X \$12.50 = _____

Off-site Field Trip = \$45, **Wednesday Off-site Field Trip fees:** #days _____ X \$45.00 = _____

Non refundable Registration Fee (if registering a sibling, \$15.00 for 2nd+ child) **+\$35.00**

TOTAL: _____

Subtract amount submitted with this form (minimum of \$35.00 Registration Fee if submitted before May 18) - _____

Amount due by Friday, May 18 _____

Please circle a t-shirt size:		
Youth XSm	Youth Sm	Youth Med
Youth Lrg	Adult Sm	Adult M

By signing below, I understand that the schedule I am submitting is final and that all fees are due by **Friday, May 18**. If I find that I need to add or switch days, I understand that there will be a \$5.00 fee to process such request. **I understand that after Wednesday, May 30, there are no refunds.**

Parent or Guardian Signature: _____

Date: _____