
Child's Name

Birthdate

Parent(s)/Guardian(s) Name(s)

Address

City

State

Zip

Phone

- I have enclosed a check for my \$50.00 non-refundable enrollment fee. Please bill me for the remainder of the tuition. I understand that I must pay the remainder of the cost in advance by the first of the month or my child's place will be forfeited. Current families enrolled in our ACH Program will stay on the ACH Program for the duration of summer camp. However, you are not considered enrolled, until you pay your \$50 enrollment fee.
- I have enclosed a check for the \$50.00 non-refundable enrollment fee and the full amount of the tuition.

I understand that I must give at least two weeks notice for cancellation or any tuition owed will be charged or not

Signature

Date

Adventure Summer Program 2020