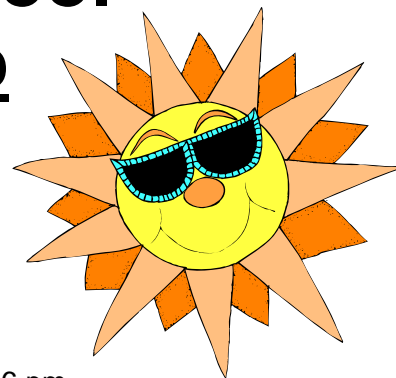
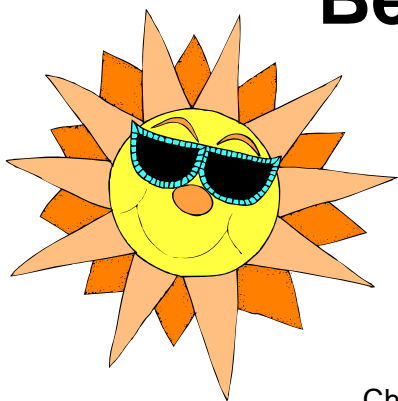


Bethel Christian School

Summer Day Camp



June 16 – August 15, 2008
 Preschool age 3 through 6th grade *

8:00 am – 4:00 pm

Child care is available from 6 am – 8 am and 4 pm – 6 pm
 and is included in the weekly and daily rate.

Activities

Arts and Crafts Music
 Bible Lessons Sports
 Computer Lab Games
 Water Play

Field Trips (K5- 6th Grade only)

Movie matinee
 Bowling
 and more...

Summer Day Camp Fees *

	Preschool (K3-K4)	K5 – 6th Grade
Regular Weekly Rate	\$170 per week	\$150 per week
Preplanned Weekly Rate Both form and payment are due by noon on Friday before the week	\$150 per week	\$130 per week
Regular Daily Rate Includes schedule changes made after the preplanned rate deadline	\$ 48 per day	\$ 40 per day
Preplanned Daily Rate Both form and payment are due by noon one business day in advance	\$ 38 per day	\$ 30 per day
BCS Family Discount: 3 rd child or more are free For families enrolled in 2007-08 or 2008-09 The oldest child(ren) are given the discount		
Late pick-up after 6 pm (rounded up by ¼ hr)	\$34 / hr	\$34 / hr

Lunch

Please provide a sack lunch for your child. Lunch service will not be available.

Grade Level

* The child's grade in 2007-2008 will indicate the summer camp grade and fee.

(Rev. 5/01/08)

Bethel Christian School - Summer Camp 2008

REGISTRATION FORM

Date _____

Student Name(s)	2007-2008 Grade	BCS Student	Age	Birthday
_____	_____	Y / N	_____	_____
_____	_____	Y / N	_____	_____
_____	_____	Y / N	_____	_____
_____	_____	Y / N	_____	_____

Address: _____ City: _____ Zip: _____ Hm ph: _____

Father/Guardian _____ Cell ph: _____ Email: _____

Mother/Guardian _____ Cell ph: _____ Email: _____

Emergency Name: _____ Phone: _____

Emergency Name: _____ Phone: _____

My child may be released to the following persons (in addition to the parents):

Name: _____ Phone: _____

Name: _____ Phone: _____

Agreement

Conduct - Students enrolled in summer camp are required to maintain the same conduct as required in the Parent/Student Handbook for the traditional school program. Students are required to cooperate fully with instructors and school staff. Bethel Christian School does not tolerate profanity, obscenity, in words or actions, disrespect of personnel or the school, or continued disobedience to the established policies of the school. The school administration reserves the right to dismiss any student who fails to adhere to the standards and policies of the school. Preschool students must be potty trained.

Finances – The registration form and payment are due as indicated on the front of this flyer. Schedule changes must be submitted to the office on the schedule change form or by email to summercamp@bethelchristian.net. If the schedule change or payment is received after the preplanned rate deadline, the regular weekly rate or regular daily rate will be charged. Online payments can be made through RenWeb. Any unpaid balance will be subject to a one percent per month (12% per year) late/finance charge assessed on the 20th of each month until the balance is paid in full.

Medical – Parents must maintain health insurance for their children. **A copy of the child's medical insurance card (proof of insurance) MUST be attached to the registration.** The school does not provide accident insurance.

Health or activity restrictions _____

Allergies _____

Check the box(es) and circle the day(s) for which you are registering.

<input type="checkbox"/> Wk 1 (6/16 - 6/20) M T W T F	<input type="checkbox"/> Wk 4 (7/07 - 7/11) M T W T F	<input type="checkbox"/> Wk 7 (7/28 - 8/01) M T W T F
<input type="checkbox"/> Wk 2 (6/23 - 6/27) M T W T F	<input type="checkbox"/> Wk 5 (7/14 - 7/18) M T W T F	<input type="checkbox"/> Wk 8 (8/04 - 8/08) M T W T F
<input type="checkbox"/> Wk 3 (6/30 - 7/03)* M T W T	<input type="checkbox"/> Wk 6 (7/21 - 7/25) M T W T F	<input type="checkbox"/> Wk 9 (8/11 - 8/15) M T W T F

* Week 3 Day camp is closed Friday, July 4th.

Authorization - My son/daughter is authorized to participate in all activities. In case of sickness or accident, Bethel Christian School is authorized to obtain emergency medical care for my child as deemed necessary and at my cost if I cannot be immediately reached. This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California and will remain effective until revoked in writing and delivered to the school office.

Parent Signature _____ Date _____

FOR OFFICE USE ONLY: Total # of weeks _____ Total fee \$ _____ Pmt Attached \$ _____		
Registration is approved _____/_____	<input type="checkbox"/> Copy of the child's medical insurance is attached.	(Rev 5/01/08)

Schedule Change Form

Bethel Christian School - Summer Day Camp 2008

Once your registration has been approved, use this form to add or change your schedule.
The preplanned rate applies if both the change form and payment are submitted by noon one day in advance.

Preschool (K3 & K4)
 Regular Weekly Rate \$170
 Preplanned Weekly Rate \$150
 Regular Daily Rate \$ 48
 Preplanned Daily Rate \$ 38

Elementary (K5 – 6th Grade)
 Regular Weekly Rate \$150
 Preplanned Weekly Rate \$130
 Regular Daily Rate \$ 40
 Preplanned Daily Rate \$ 30

Student Name _____ 2007-2008 Grade _____ Pmt Amt \$ _____

Student Name _____ 2007-2008 Grade _____ Pmt Amt \$ _____

Student Name _____ 2007-2008 Grade _____ Pmt Amt \$ _____

Student Name _____ 2007-2008 Grade _____ Pmt Amt \$ _____

Cross off (X) the days you wish to cancel, and circle the days for which you are registering.

<input type="checkbox"/> Wk 1 (6/16 - 6/20) M T W T F	<input type="checkbox"/> Wk 4 (7/07 - 7/11) M T W T F	<input type="checkbox"/> Wk 7 (7/28 - 8/01) M T W T F
<input type="checkbox"/> Wk 2 (6/23 - 6/27) M T W T F	<input type="checkbox"/> Wk 5 (7/14 - 7/18) M T W T F	<input type="checkbox"/> Wk 8 (8/04 - 8/08) M T W T F
<input type="checkbox"/> Wk 3 (6/30 - 7/03) M T W T	<input type="checkbox"/> Wk 6 (7/21 - 7/25) M T W T F	<input type="checkbox"/> Wk 9 (8/11 - 8/15) M T W T F

Parent Name (Print) _____ Signature _____ Date _____

Office Use: Cash / Check / CrCd / RW # _____	Pmt Amt _____	Initials _____	Date _____
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..... Detach Here

Schedule Change Form

Bethel Christian School - Summer Day Camp 2008

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 Regular Weekly Rate \$170
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 Preplanned Daily Rate \$ 38

Elementary (K5 – 6th Grade)
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 Regular Daily Rate \$ 40
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Student Name _____ 2007-2008 Grade _____ Pmt Amt \$ _____

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Student Name _____ 2007-2008 Grade _____ Pmt Amt \$ _____

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Parent Name (Print) _____ Signature _____ Date _____

Office Use: Cash / Check / CrCd / RW # _____	Pmt Amt _____	Initials _____	Date _____
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