

**Chesapeake Christian Learning Center
Summer Camp 2019**

206 Weston Woods Dr Pasadena MD, 21122
410-317-5340 chesapeakechristianlearningcenter.com

Child's Full Name: _____ Nickname: _____

Street: _____ City: _____

State: _____ Zip Code: _____

Home Telephone: _____ Date of Birth: _____

Male / Female

Parent/Guardian #1 Name: _____ Work phone: _____ Cellphone: _____ Email: _____	Parent/Guardian #2 Name: _____ Work phone: _____ Cellphone: _____ Email: _____
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Emergency Contact Person (if parent cannot be reached; must be local)	
Name: _____	Relationship to Child: _____
Home phone: _____	Cellphone: _____

	Schedule	Camp Fees	Select
Before Care	M-F 6:30am – 9:15am	\$10/day	
After Care	M-F 12:30pm- 6:00pm	\$15/day	
Summer Camp	M-F 9:15am-12:30pm	\$145/week +\$50 activity fee (one time fee)	

Week	Session	Theme	Select	Week	Session	Theme	Select
1	June 17-21	Aloha Summer: Fun Hawaiian themed activities to kick off summer!		7	July 29-August 2	Pirates and Mermaids: Dive into fun as we learn about swash-buckling pirates and graceful mermaids!	
2	June 24-28	Game Week: Come enjoy a week of fun and exciting games!		8	August 5-9	Secret Spy Week: Be a spy for a week and solve a new mystery every day!	
3	July 1-5	Stars and Stripes: Fun, patriotic activities as we celebrate our country's birthday!		9	August 12-16	Food, Food, Food: Be a chef for a week and learn all about food!	
4	July 8-12	Mad Science: Come be a mad scientist!		10	August 19-23	Around the World: Learn about an exciting new country every day!	
5	July 15-19	Color Week: Enjoy plenty of colorful activities and experiments!		11	August 26 – 30	Fun in the Sun: Sunny activities galore to end the summer!	
6	July 22-26	Splish Splash: Get wet at our fun camp all about water!					

All new students

1. Must fill out a separate health inventory form (MD State Dept. of Education required). Please see Director to obtain the form.

Registration Fee: A \$50.00 activity fee must be included with your application form. The activity fee is non-refundable.

MEDICAL INFORMATION Any general health or allergy concerns: YES _____ NO _____

Details: _____

SIGNATURES: I hereby:

1. Agree to abide by the policies and safety precaution procedures of the camp.

Parent #1 Signature

Date

2. Grant permission for my child to be photographed during summer camp activities and for the pictures to be used on our website and Facebook.

Parent Signature

Date