540.00

DUE: MAY 15, 2015

REGISTRATION

FORM

Please complete this form and return no later than May 15, 2015 Please include the \$10.00 deposit for each week that your child will be attending as well any additional shirt payments.

Late registration will only be accepted if space is available.

Child's Name	Parent	Parent Signature		
Address		Household Name:		
Grade (Fall 2015)	Age			
Mother's Name	Father's Nan	me		
Home Phone	Home Phone	ne		
Work Phone	Work Phone	e		
Cell Phone	Cell Phone			
Emergency Contact (s): (MUST BE COMPLE	ETED)			
Name	Phone			
Name	Phone			
Will your child be in WCS Summer School? (all lease check the dates your child will attend Day WEEK 1: June 3-5	/camp:	THE RIGHT TRACK! Summer Daycamp Shirts:		
WEEK 3: June 15-19 M T WEEK 4: June 22– 26 M T WEEK 5: June 29-July 3 M T WEEK 6: July 6-10 M T WEEK 7: July 12-17 M T WEEK 8: July 20– 24 M T WEEK 9: July 27-31 M T WEEK 10: Aug 3-7 M T	W	Please indicate the total number of shirts you would like next to the size your child wears. One shirt is included with your registration, all additional shirts are \$15.00. CHILDREN'S SIZES ADULT SIZES S (6/8) S S S S S S S S S S S S S S S S S S S		
WEEK 11: Aug 10-12 M T	W Threen F CLOSED			



- STAFF USE ONLY-

PLEASE DO NOT WRITE ON THIS PAGE

	NAME		SD Account #			
UΑ	NTITY	_ PAID				
Rec	eceived Daycamp Shirt: Y N N 2015 PAYMENT/ DEPOSIT RECORD					
[WEEK#	DAYS WEEKLY TOTAL DEPOSIT PAYMENT CASH	CHECK# C.C			
RE	GISTRATION					
1	JUNE 3-5					
2	JUNE 8-12					
3	JUNE 15-19					
4	JUNE 22-26					
5	JUNE 29- JULY 3					
3	JULY 6-10					
7	JULY 13-17					
3	JULY 20-24					
9	JULY 27-31					
10	AUG 3-7					
11	AUG 10-12					
	ACCC COMP					