

**ZION TEMPLE CHRISTIAN ACADEMY  
APPLICATION FOR (S.A.P) SUMMER ACTIVITY PROGRAM 2014  
TEACHER INFORMATION SHEET**

\_\_\_\_\_  
Name

Home Phone \_\_\_\_\_

Mom's cell \_\_\_\_\_

Dad's cell \_\_\_\_\_

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Zip

AGE \_\_\_\_\_ D.O.B. \_\_\_\_\_ Place of Birth \_\_\_\_\_ SEX \_\_\_\_\_

Child's M.D. \_\_\_\_\_ Dr.'s Phone # \_\_\_\_\_

List any physical difficulties: \_\_\_\_\_

Circle grades previously attended  
at this school: None K3 K4  
K5 1st 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup>

Names & grades of other children in this program:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Last School attended: \_\_\_\_\_

Do you wish to receive literature and/or a call from our Pastor about our church? YES OR NO

Father: \_\_\_\_\_ Employer: \_\_\_\_\_ Phone# \_\_\_\_\_

Email Address: \_\_\_\_\_

Mother: \_\_\_\_\_ Employer: \_\_\_\_\_ Phone# \_\_\_\_\_

Email Address: \_\_\_\_\_

If parents are separated, with whom does the child reside? \_\_\_\_\_

(List everyone allowed to pick up your child(ren).

**EMERGENCY CONTACTS AND PHONE NUMBERS**

<i>Name</i>	<i>Phone Number</i>	<i>Name</i>	<i>Phone Number</i>

***To assist us in our scheduling, please indicate the time you will drop-off your child in the morning and the time you will be picking your child up in the afternoon.***

Morning Drop-Off: \_\_\_\_\_ Afternoon/Evening Pick-up: \_\_\_\_\_

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

Dear Parent:

In order to keep Zion Temple **Summer Activity Program** afloat, all bills must be promptly paid. Please sign and return this Promissory Agreement below with your application.

**Promissory Agreement**

My child/ children will be attending the ZTCA Summer Program and I agree to make regular Weekly payments of \$ \_\_\_\_\_ payable to: Zion **Temple Christian Academy Summer Activity Program**, for my child/ children beginning \_\_\_\_\_ 20 14 thru \_\_\_\_\_, 20 14.

- 1. \_\_\_\_\_  
Child's Name
- 2. \_\_\_\_\_  
Child's Name
- 3. \_\_\_\_\_  
Child's Name

(Child's name, parent signature and date are required for the following. Please do not add or take away from any of these statements.

**DISCIPLINE STATEMENT**

I agree to authorize the Administrator, the assigned instructors of the Zion Temple Summer Activity Program to exercise authority as to control behavior and discipline over \_\_\_\_\_ while at school or during any S.A.P activity outside school as the Administrator or Instructor deem necessary.

\_\_\_\_\_  
Parent Signature Date

**STATEMENT OF COOPERATION**

In making application for my child, it is my desire to have him/her complete the Summer Activity Program for the year 2014. It is also my understanding that the policy of the SAP is to make **no refunds on registration fees**. I also give permission for my child to take part in all SAP activities; including sports and SAP sponsored field trips away from the school premises, absolving the SAP from liability to me or my child because of any injury to my child at school or during any Summer Program activity.

\_\_\_\_\_  
Parent Signature Date

# **FOR PARENT INFORMATION**

## **REGISTRATION FEE (Non-Refundable)**

\$39.00 - Kindergarten thru 5<sup>TH</sup> Grade

\$39.00 - Age 3 thru Preschool

\* \* \* \* \*

**Full 10 week program students have priority enrollment**

**Kindergarten thru 6<sup>th</sup> Grade**

**Ten (10) Week Activity Program – COST CHART**

No of Children	3 to 5 Days Per Week	1 to 2 Days Per Week
1 Child	\$96.60	\$48.30
2 Children	\$152.25	\$100.80
3 Children	\$216.30	\$123.90

**PLEASE NOTE: All Payments are accepted on a weekly basis only and should be paid on Monday of each week. Children will not be permitted to class if not paid on due date.**

**Age 3 thru Preschool Graduate**

**Ten (10) Week Activity Program – COST CHART**

### **Preschool (No Adjustment Rate with Family Members)**

Children who are 2 years of age and will be age 3 by September 30, 2014 are accepted in this program.  
Children who are 3 years of age and will be age 4 by September 30, 2014 are accepted in this program.

No of Children	3 to 5 Days Per Week
1	\$108.15

### **TEN WEEK PAYMENT DATES**

**JUNE 02, 2014**

**JUNE 09, 2014**

**JUNE 16, 2014**

**JUNE 23, 2014**

**JUNE 30, 2014**

**JULY 07, 2014**

**JULY 14, 2014**

**JULY 21, 2014**

**JULY 28, 2014**

**AUGUST 04, 2014**

**THERE WILL BE A \$37.00 CHARGE FOR ALL RETURNED CHECKS.**  
**PAYMENTS MUST BE SETTLED BEFORE THE NEXT WEEKLY PAYMENT IS DUE.**

Dates and prices subject to change with notice.

**SUMMER ACTIVITY PROGRAM - 2014**  
**SINGLE FEE CHART & NOTES**  
**COST SHEET**

Non-refundable registration fee:

\$39.00 - Age 3 thru Preschool

\$39.00 - Kindergarten graduate thru Age 11

Ten (10) Week Program / ***Weekly Payment Schedule*** (example: One child payment schedule)

	<i>Kindergarten Graduate thru Age 11</i>	<i>Age 3 - Preschool (Have not completed Kindergarten)</i>
<b>Payment Dates</b>		
June 02, 2014	\$96.60	\$108.15
June 09, 2014	\$96.60	\$108.15
June 16, 2014	\$96.60	\$108.15
June 23, 2014	\$96.60	\$108.15
June 30, 2014	\$96.60	\$108.15
July 07, 2014	\$96.60	\$108.15
July 14, 2014	\$96.60	\$108.15
July 21, 2014	\$96.60	\$108.15
July 28, 2014	\$96.60	\$108.15
August 04, 2014	\$96.60	\$108.15

The overall total cost of the 10 week program is \$1,081.50 for Preschool and \$966.00 for K-5 graduate or older. There will be no 4th of July Holiday reduction. When after two days, and payment is not made, (with or without word from parent), your child will not be permitted entrance into the Summer Program.

**Late Fees:**

**First** occasion late fee is \$5.00 at 6:01 p.m., an additional \$1.00 will be charged for every five minutes after 6:05 p.m. **Second** occasion late fee is \$25.00 at 6:01 p.m. An additional \$1.00 will be charged for every minute after 6:05 p.m. Checks are to be made payable to Zion Temple Christian Academy. Overtime payment is due the same day. Fee is to be given directly to the leader who supervised your child while waiting for pick-up. Please remember that your child must be in your care by 6 p.m. The fee is due at the time of pickup.

**Payments:**

Payments that are made for the Summer Activity Program are not to be confused with payments to Zion Temple Christian Academy. Please separate these payments.

Please plan to make prompt and timely payments if your child(ren) will be attending either the Summer Activity Program or Zion Temple Christian Academy. Due to the preparation and availability of facilities and attendants, any absence in any given week will not merit a deduction in cost. **Only one (1) week of vacation may be deducted per summer.**

**Last day of the summer program will be Friday, August 08, 2014.**

**Keep this Cost Sheet for your information.**

*Dates and prices subject to change with notice.*

**Zion Temple Christian Academy  
3771 Reading Road  
Cincinnati, Ohio 45229  
513-861-5551**

**Summer Activity Program Photo Release Form**

Dear Parents/Guardians:

During the course of the summer program there are times when pictures or videos of your child may be taken, or when he or she may be interviewed while at the program, to showcase an event or to detail a project. These pictures, videos, and interviews may be used for internal and external audiences. These materials include but not limited to advertisements, brochures, news releases, newspapers, newsletters, websites, and television.

Please complete the form below and return it with your packet. We appreciate your cooperation.

Sincerely,

Administration  
Zion Temple Christian Academy Summer Activity Program

\_\_\_\_\_ I give my permission for my child to be photographed, videotaped, or interviewed for all summer camp purposes, including but not limited to the Zion Temple Christian Academy web site.

\_\_\_\_\_ I do not give my permission for any photographs, videotapes, or interviews of my child to be published or used for any purpose.

Child's Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_