

USR Children's Academy Summer Camp Program Application

Student's Name: _____

Date of Birth: _____ Gender: Boy Girl
Address: _____

Town: _____ State: _____ Zip: _____

Home Phone: _____ Email: _____

Mother's Name: _____ Cell Phone: _____

Father's Name: _____ Cell Phone: _____

Emergency Contact/Authorized persons to pick up your child if parents cannot be reached:

Name: _____ Cell Phone: _____

Name: _____ Cell Phone: _____

Program Selection:

- Rainforest Exploration 5 Days 3 Days
Days M T W TH F
 Creative Arts and Artists
 Magnets, Molecule & Mystery
 Ready, Set, Travel
 Anatomy of Me

5 Days - 9:00 – 12:30

3 Days – 9:00 – 12:30

10 % Sibling Discount

- | | |
|---|---|
| <input type="checkbox"/> \$325/week for any 1 week | <input type="checkbox"/> \$250/week for 1 week |
| <input type="checkbox"/> \$315/week for any 2 weeks | <input type="checkbox"/> \$240/week for 2 weeks |
| <input type="checkbox"/> \$305/week for any 3 weeks | <input type="checkbox"/> \$230/week for 3 weeks |
| <input type="checkbox"/> \$295/week for any 4 weeks | <input type="checkbox"/> \$220/week for 4 weeks |
| <input type="checkbox"/> \$275/week for all 5 weeks | <input type="checkbox"/> \$200/week for all 5 weeks |

Cancelleds & Refunds. We make staffing arrangements and other provisions upon enrollment of your child. Therefore, we regret that we cannot offer refunds in the event of your child's withdrawal from our camps. However, we do understand that sometimes a withdrawal is unavoidable. In that case, the unused portion of the tuition will remain on file as a credit to be used within one year from the date of withdrawal.

A CHECK FOR THE REGISTRATION FEE OF \$50.00 AND A 50 PERCENT TUITION DEPOSIT IS DUE WITH THIS APPLICATION. THE BALANCE IS DUE BY MAY 15, 2015. All tuition will be paid in full, with no refunds or credits for illness, vacations, inclement

weather or early withdrawals. There will be a \$20.00 charge for any returned checks. The Upper Saddle River Children's Academy reserves the right to refuse or discontinue enrollment of a child when the association is not conducive to the welfare of the school, teachers, and other attending children, as determined by the school director. When such action is necessary, a pro-rated refund of the unearned and paid tuition will be made. Your signature on the application designates your understanding and acceptance of this policy.

Signed _____

Date _____
