# SPX SUMMER CAMP

### TOT CAMP AGES 3 & 4

CAMPER NAME	
MEMBER/ GUEST #	DATE:

WEEK	M- F FULL DAY		M- F HALF DAY		MWF FULL DAYS		MWF HALF DAY	
	MEMBER	NON-MEMBER	MEMBER	NON-MEMBER	MEMBER	NON-MEMBER	MEMBER	NON-MEMBER
]. JULY 1-5* NO 7/4	\$234	\$270	\$162	\$190	\$180	\$210	\$165	\$155
2. JULY 8-12	\$290	\$335	\$200	\$235	\$180	\$210	\$165	\$155
3. <b>J</b> ULY <b>15-19</b>	\$290	\$335	\$200	\$235	\$180	\$210	\$165	\$155
4. JULY <b>22-26</b>	\$290	\$335	\$200	\$235	\$180	\$210	\$165	\$155
5. JULY 29- AUG 2	\$290	\$335	\$200	\$235	\$180	\$210	\$165	\$155
6. AUG 5-9	\$290	\$335	\$200	\$235	\$180	\$210	\$165	\$155
7. AUG 12-16	\$290	\$335	\$200	\$235	\$180	\$210	\$165	\$155
8. AUG 19-23	\$290	\$335	\$200	\$235	\$180	\$210	\$165	\$155
TOTAL			8 13		at H			

<sup>\*</sup>PLEASE NOTE ALL TOTS WILL RECEIVE A GUIDED SWIM LESSON ON WEDNESDAY'S AND THURSDAYS
ALL OTHER DAYS THEY WILL SWIM IN THE KIDDIE POOL \*

#### \*TUESDAY/THURSDAY RATES AVAILABLE SPEAK TO MISS DANIELLE TO FIND OUT MORE \*

EXTENDED CARE				
WEEK	7:00-8:30 AM	3:30- 6:30 PM		
	PER WEEK	PER WEEK		
1. JULY 1-5* NO 7/4	\$50	\$55		
2. July 8-12	\$50	\$55		
3. <b>JULY 15-19</b>	\$50	\$55		
4. JULY <b>22-26</b>	\$ <mark>5</mark> 0	\$55		
5. JULY 29- AUG 2	\$50	\$55		
6. AUG 5-9	\$ <mark>5</mark> 0	\$55		
7. <b>AUG 12-16</b>	\$50	\$55		
8. AUG 19-23	\$50	\$55		
TOTAL				

CAMP T SHIRT MUST BE PRE ORDERED BY MAY 30TH	CIRCLE SIZE  YOUTH  XS, S, M , L, XL	\$10.00
P <mark>izz</mark> a Friday's & ICE Cream	CIRCLE CHOICE PIZZA ONLY ICE CREAM ONLY BOTH	PIZZA ONLY- \$5.00/ FRIDAY ICE CREAM ONLY \$1.00/ FRIDAY BOTH \$6.00/FRIDAY
TUMBLE BUS	CIRCLE DATES  MON JULY 8TH  TUES 7/23  MON 8/5	\$10.00/ VISIT

#### \*\*\$10/PER WEEK DISCOUNT IF YOU PAY CASH/CHECK

		CC NUMBER:
DAY CAMP	PAID IN FULL	EXP DATE:
CASH DISCOUNT	PAYMENT PLAN	NAME ON CARD:
EXTENDED CARE	THREE PAYMENTS	ZIP CODE:
ADD ON'S	:1/3 UPON REGISTRATION 2ND PAYMENT DUE MAY IST,	TO SUBMIT PLEASE EMAIL DANIELLE AT
TOTAL	FINAL PAYMENT JUNE IST	DRUSSO@SPORTSPLEX-NW.COM



## CAMP REGISTRATION

CAMPER NAME		HOME PHONE	DATE
STREET	CITY		_ ZIP CODE
AGE DA	ATE OF BIRTH	E-MAIL A	Address
GRADE CHILD IS ENT	TERING IN THE FALL		
PREVIOUS SPORTSPL	EX CAMPER?	IS CAMPER A	SPORTSPLEX MEMBER?
PRIMARY CONTA	CT		
NAME		_RELATIONSHIP TO C	CAMPER
ADDRESS (IF DIFFER	ENT FROM CAMPER)		
CELL#		_ W <mark>or</mark> k/Dayt <mark>ime</mark> # _	
SECONDARY CON	TACT		
		_ RELATIONSHIP TO C	CAMPER
ADDRESS (IF DIFFER	ENT FROM CAMPER)	- I	
*PRIMARY CONTACT WIL	L RECEIVE TEXT MESSAGI	ES ABOUT WEATHER AND E	EMERGENCY CLUB CLOSINGS
THE FOLLOWING CONTA IF THEY ARE NOT ON THI	CTS LISTED BELOW WILL IS LIST, THEY WILL NOT B	ROGRAM HOURS (' BE ABLE TO PICK UP YOUR E ABLE TO PICK UP YOUR (	CHILD FROM CAMP.
NAME	Rei	LATIONSHIP TO CAMP	PER
CELL #	WC	ORK/DAYTIME #	
Name	REI	LA <mark>ti</mark> on <mark>sh</mark> ip to c <mark>am</mark> f	PER
CELL #	WC	ORK/DAYTIME #	
NAME	RE	LATIONSHIP TO CAMI	PER
CELL #	Wo	ORK/DAYTIME#	
I HAVE READ AND AG		OF THE ENROLLMENT .	AGREEMENT
PARENT/GUARDIAN SIGNATUR	E		DATE