

2011 CAMP DISCOVERY REGISTRATION PACKET

CAMP DISCOVERY

Entering Grades K-6 (see details on flyer)

Please include this form when returning your registration materials. Registration materials must be turned in to Legacy Christian Academy.

Name of Child: _____

Are you currently a Legacy family or a Sunshine Day Camp* family:
YES NO

**A Sunshine Day Camp Family is described as a family attending one of the following Sunshine locations: Fair Oaks Ranch, Pinetree, Valencia Valley, Pico Canyon, Stevenson Ranch, Oak Hills, Northlake Hills, and our Legacy program.*

If so, which one (circle below):

- | | | |
|---------------------------|---------------------------|-----------------|
| Fair Oaks Ranch | Fair Oaks Ranch Preschool | Legacy Academy |
| Northlake Hills (Castaic) | Oak Hills | Pico Canyon |
| Pinetree (Canyon Country) | Stevenson Ranch | Valencia Valley |

CANCELATION / CHANGE POLICY

Legacy offers a 100% no penalty cancellation policy if the cancellation is made prior to the deadline.

- The deadline to cancel a week of camp is Friday, June 3

A week may be canceled after the cancellation deadline. However, if a week is canceled after the deadline, you will be required to pay as follows:

- To receive the 50% refund, you must provide at least a one week (5 business day) notice—prior to the week you wish to cancel. Your request must be made in writing by using the available Change Form (enclosed with your paperwork and available at each location’s front desk).
- Canceling a week with less than one week (5 business day) notice will require a 100% payment for the tuition cost of that particular week, regardless of reason for non-attendance.

A week may be changed in the same manner as outlined in the above cancellation policy.

Please understand that Legacy’s advance reservation of instructors, hiring of staff, the purchasing of supplies, and other programming needs are based on camper reservations.

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For Office Use Only

Forms Returned:

Reg. / Cost Form	Enroll Application	Contract/Consent	Enroll Agreement
Other			
Current Family: Yes No		Verified By:	
Registration Fee Charge:		Amount Collected:	Check #:
Date Received Paperwork:		Location Collected:	
Employee Signature:			Date:

LEGACY'S "CAMP DISCOVERY" ENROLLMENT APPLICATION

Child's Name _____ Date of Birth _____ Grade in Aug. _____

Home Address _____

City _____ Zip Code _____ Home Phone _____

PARENT / LEGAL GUARDIAN

Name _____ Work Phone _____ Cell Phone _____

PARENT / LEGAL GUARDIAN

Name _____ Work Phone _____ Cell Phone _____

EMERGENCY CONTACT/PERSONS AUTHORIZED TO PICK-UP THE CHILD FROM THE CENTER

(Other than parents)

Name _____	Relationship _____	Phone _____
Name _____	Relationship _____	Phone _____
Name _____	Relationship _____	Phone _____
Name _____	Relationship _____	Phone _____

CONSENT FOR MEDICAL TREATMENT

I (we) the undersigned parent, parents or legal guardian of _____, a minor, do hereby authorize and consent to any X-ray examination, anesthetic, medication or surgical diagnosis rendered under the general or special supervision of any member of the medical staff and emergency room staff licensed under the provisions of the Medicine Practice Act or a Dentist licensed under the provisions of the Dental Practice Act and on the staff of any acute general hospital holding a current license to operate a hospital from the State of California Department of Public Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power to render care which the aforementioned physician in the exercise of his best judgment may deem advisable. It is understood that effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached.

This authorization is given pursuant to the provisions of section 25.8 of the Civil Code of California. It is understood that the resulting expenses will be the responsibility of the parent(s) or participant(s). The consent shall remain effective as long as my child is enrolled in the Legacy program.

List any restrictions _____ Last Tetanus Booster Shot _____

Allergies to Drugs or Foods _____

Any Special Medications or Pertinent Information _____

Name of Physician _____ Phone _____ Address _____

Name of Dentist _____ Phone _____ Address _____

Insurance Carrier/Plan Name _____ Policy Number _____

Name of Insured _____ Expiration of Policy _____

I am enrolling my child into the Legacy program. I agree to abide by all policies set forth in the Summer Camp Brochure & Summer Camp Registration materials.

____ (Initial) Yes, I have received the attached "Enrollment Agreement", "Contract and Consent Form", for Summer Camp 2011 and I agree and will follow all of the policies included within these forms

PARENT / LEGAL GUARDIAN _____ Date _____

PARENT / LEGAL GUARDIAN _____ Date _____

Admittance to our programs will be denied if this form is incomplete

2011 "CAMP DISCOVERY" REGISTRATION / COST FORM

Please be advised that we are requiring you to commit to specific weeks of enrollment. This information is necessary for us to properly plan and schedule the summer activities.

Child's Name: _____ Grade Next Fall: _____

Are You Currently Attending Legacy or a Sunshine Day Camp* facility: _____ If so, which: _____

*A Sunshine Day Camp Family is described as a family attending one of the following Sunshine locations: Fair Oaks Ranch, Pinetree, Valencia Valley, Pico Canyon, Stevenson Ranch, Oak Hills, Northlake Hills, and our Legacy After School program.

Name of Siblings Also Attending Camp and at Which Location: _____

SECTION #1 - SELECT THE CAMPS YOUR CHILD WILL BE ATTENDING:

Class hours are 9:00am-1:00pm (except Surf Camp 7:45am-2:00pm and Vacation Bible School 9:00am-12:00pm). Tuition includes days noted below.

Camp Description	Date of Class	Attending?	
Dance & Cheer Camp \$195 per week	June 20 – 24	YES	NO
	July 25 – 29	YES	NO
Surf Camp \$240 per week	June 13 – 17	YES	NO
	July 25 – 29	YES	NO
Glee Camp \$390 for 2 week class	June 20 – July 1	YES	NO
Drama Camp \$390 for 2 week class	July 11 – 22	YES	NO
Mad Science \$195 per week	June 20 – 24	YES	NO
	July 11 – 15	YES	NO
Culinary Camp \$195 per week	June 27 – July 1	YES	NO
	July 25 – 29	YES	NO
Chess Camp \$195 per week	June 27 – July 1	YES	NO

Camp Description	Date of Class	Attending?	
Computer Camp \$195 per week	June 27 – July 1	YES	NO
	July 11 – 15	YES	NO
Kindergarten Readiness Camp \$195 per week	July 11 – 15	YES	NO
	July 18 – 22	YES	NO
	July 25 – 29	YES	NO
	August 1 – 5	YES	NO
Chinese Language Camp \$195 per week	June 13 – 17	YES	NO
	June 20 – 24	YES	NO
	June 27 – July 1	YES	NO
Vacation Bible School* \$25 supply fee	July 19 - 22	YES	NO

***EXTENDED CARE OPTION** (6:30am-9:00am & 1:00pm-6:30pm): Extended care is available at an additional cost of \$40 per week/per class (except Vacation Bible School). Vacation Bible School extended care can be added for an additional cost of \$120 for the week (includes care from 6:30am-9:00am & 12:00pm-6:30pm).

I would like to add the extended care option for the following week(s)/class(es): _____

**THE DEADLINE TO CANCEL A WEEK OF CAMP IS FRIDAY, JUNE 3
TUITION IS DUE PRIOR TO JUNE 13**

SECTION #2- IMPORTANT INFORMATION FOR ALL SUMMER CAMP FAMILIES:

If you will be canceling a week of camp, it must be done **PRIOR TO THE DEADLINE**. The deadline is **Friday, June 3**. After this date, if you have not canceled any weeks, you will be charged for each week you reserved regardless if you attend or not. Please understand that Legacy's advance reservation of instructors, hiring of staff, the purchasing of supplies, and other programming needs are based on camper reservations. This does not enable us to refund tuition regardless of the reason for non-attendance.

Parent Signature _____

SECTION #3- REGISTRATION FEES:

This section is to be completed for a child **NOT ATTENDING** Legacy or a Sunshine Day Camp* (see above) program.

Summer Camp Registration Fee: \$50 per camper _____

Deposit (\$50 per week): A \$50 deposit is required for each week you would like to reserve for each family: _____
This deposit will be subtracted from your tuition rate each week. (# weeks x \$50)

Total registration fees due for Summer Camp: _____

LEGACY "CAMP DISCOVERY" SUMMER CAMP ENROLLMENT AGREEMENT

Please enroll _____ in the Summer Camp Program at Legacy Christian Academy.

Initial I understand the summer registration fee is non-refundable, not applicable to tuition and is payable for each summer camp. The registration fee is for a child **NOT ATTENDING** a Sunshine Day Camp facility Or Legacy Christian Academy. A Sunshine Day Camp facility is one of the following: Fair Oaks Ranch, Pinetree, Valencia Valley, Pico Canyon, Stevenson Ranch, Oak Hills, or Northlake Hills.

Initial I hereby agree to pay tuition prior to attendance, for each session, by check, money order, credit, or debit card (cash will not be accepted.).

Initial I understand that tuition will be charged weekly and billed in 2 installments (sessions). Payment for Session #1 is due prior to camp starting, and no later than June 13 (early bird due date May 27). Session #2 is due prior to session #2 starting, and no later than July 11 (early bird due date June 24).

Initial I understand that I am responsible for payment for the weeks that I have signed up for. If you will be canceling a week of camp, it must be done **PRIOR TO THE DEADLINE** (see the cancelation policy for details). The deadline for Session #1 is Friday, June 3. The deadline for Session #2 is Friday, July 1. After this date, if you have not canceled any weeks, you will be charged for each week you reserved regardless if you attend or not. Cancelations must be made with a Change Form.

Initial I understand that if my child remains at Legacy past the scheduled closing, I will be charged, and I agree to pay \$1.00 for each minute per child, after closing. Payment is due immediately. Any more than three late pick-ups may be cause for termination from the program.

Initial I understand that if the Legacy staff is unsuccessful in contacting any authorized person(s) to pick up my child one hour after closing, the Department of Children's Services will be called to pick up my child.

Initial I understand both a \$25.00 returned check charge and a \$25.00 late payment fee will be charged for each returned check and agree to pay this fee within one week of notification. I understand that after one checks has been returned, I will be required to pay all remaining summer camp fees by money order, cashier's check, debit card, or credit card.

Initial I understand I must sign my child in and out of Legacy's Program daily and that I may be subject to a \$25.00 fine if I fail to do so. I understand that Legacy is not responsible for my child until signed in. Should I wish to have my child released to another adult, I will send my written authorization. This adult will be required to show photo identification.

Initial I realize children attending the Legacy Program will be required to follow all program rules. Students may be expelled from the program for failure to meet behavioral expectations. I further realize that I as a parent may be removed from the program for failure to follow all of Legacy's policies and procedures.

Initial I understand the Legacy Program and staff will not be held liable for student injury; or loss, damage, or theft of property while my child is in attendance at Legacy.

Initial I understand and agree with the arbitration / dispute resolution policy as explained in the Parent Registration Handbook.

Initial I understand my child may be transported by either a certified school bus and driver, or a certified youth bus van, driven by a licensed class B, youth bus driver.

Initial I understand my child will be participating in many types of activities (i.e., the use of playground structures, sports, games, and other play experiences typical of a summer camp program, etc.). I hereby authorize my child to participate in these activities. Further, I agree to abide by Legacy's "Contract & Consent" form while my child is attending Legacy.

Parent / Legal Guardian: _____ Date: _____

Parent / Legal Guardian: _____ Date: _____

LEGACY'S "CAMP DISCOVERY" CONTRACT & CONSENT

The undersigned parent(s) or guardian(s) of _____, a minor child, hereby enroll said child in the Legacy Program and agree to abide by all policies of the center.

We have read and understand Legacy's Tuition, Admission and General Policies and agree to abide by them and to cooperate with Legacy's management in all matters concerning the operation of the program and well being of the children enrolled therein. I hereby acknowledge that I have received a copy of the Tuition, Admission, and General Policies Agreement of Legacy's Summer Enrichment Camp Programs.

I understand that my child may be discharged from Legacy should I or my child fail to comply with the requirements of the annexed policies or the appropriate requirements of the management personnel at Legacy.

The above listed child has my permission to participate in all activities that are part of the Legacy Summer Enrichment Camp program. These activities may include the use of playground, sports, games, field trips, and other active play experiences typical of a summer camp program.

I, the undersigned, hereby release and discharge the Legacy programs its employees and owners, from all liability arising out of or in connection with the above described activity. For the purposes of this agreement, liability means all claims, demands, losses, causes of action, suits or judgments of any and every kind that I, my heirs, executors, administrators may have against the camp because of any death, personal injury or illness, or because of any loss or damage of property that results from any cause other than negligence of the camp.

I have no objection to my child being included in photographs, slides or movies taken at the camp that might be used for purposes of interpreting the camp program or for program publicity.

I have read and agree to all of the statements in this document.

Signature of Parent / Legal Guardian: _____ Date: _____

Signature of Parent / Legal Guardian: _____ Date: _____

Admittance to our programs will be denied if this form is incomplete.