



Warner Christian Summer Camp 2017



Registration Fee:
(Non- Refundable)
\$35 (Includes t-shirt)
\$25 Early Bird Reg. by 4/7/2017

Base Rate:
25 a day/\$80 a week*
Includes trips to the movie theater, splash pads,
campus activities, shows, and more!
Breakfast, lunch and Snacks Included!

Add-On Activities:
Standard Trips \$10 each
Premium Trips Priced Individually

*** Multiple Child Discounts Available**
***Accepting ELCFV Funds**

June 1st - August 4th
6:30 am to 6:00 pm
K5-6th (going into 7th)

Warner Elementary Summer Day Camp 2017 Registration Form

(Please Complete a Separate Registration Form for Each Child)
PLEASE PRINT NEATLY

Child's Full Name: _____ **Age:** _____ **Birthdate:** ____/____/____

Grade Last Completed (2016-2017 school year) _____ **School Attending:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Mailing Address (if different from above): _____

Name & Relationship of child's primary caretaker: _____

Mother's Name: _____ **Does the mother have permission to pick up this child?:** _____

Mother's Numbers: Cell Phone: _____ **Work Phone:** _____ **Other:** _____

Mother's Personal Email: _____ **Work/Other Email:** _____

Father's Name: _____ **Does the father have permission to pick up this child?:** _____

Father's Numbers: Cell Phone: _____ **Work Phone:** _____ **Other:** _____

Father's Personal Email: _____ **Work/Other Email:** _____

The following additional people have permission to pick up my child:

Name: _____ **Relationship:** _____ **Phone:** _____

Name: _____ **Relationship:** _____ **Phone:** _____

Name: _____ **Relationship:** _____ **Phone:** _____

Name: _____ **Relationship:** _____ **Phone:** _____

Does this child have any diagnosed medical conditions that we should be aware of? _____

Does this child have any Allergies that we should be aware of? _____ **Please see attached medical form.**

I wish for the above minor to be allowed to participate in or be a spectator at the activities sponsored by the Warner Summer Day Camp, and I give permission for the above mentioned child to go on trips away from the school facilities. I agree not to hold White Chapel Church of God & Warner Christian Academy or any employees responsible in any way for any accidents which may occur, nor for any expenses which are incurred thereby. In case of a minor accident or illness, I request Warner to contact me and then any other family member who is eligible to pick up my child if I cannot be reached. If no contact can be made or there is an emergency situation I hereby authorize the staff of Warner Summer Day Camp to make whatever arrangements they determine necessary for the health and well-being of my child.

Signature Parent/Guardian: _____ **Date:** _____

Please circle appropriate t-shirt size for your child. Circle only one.

Youth Sizes: 6-8 10-12 14-16 (or) Adult Sizes: S M L XL

Warner Summer Day Camp, 1730 S. Ridgewood Ave., South Daytona, FL 32119

Phone: 386-767-5451 ext. 221 Email: SummerCamp@wcaeagles.org

The Volusia County School Board is not affiliated with this program in any manner, nor does it endorse or assume any responsibility for any activities that may occur in connection with it.

TURN OVER



Warner Christian

Summer Camp

2017



NEW Payment/Registration Plan For 2017 WCA Summer Camp

- All field trips and daily/weekly rates are required to be Paid in full on the Monday before they take place.
- Parents will also sign off on all trips your child/children Will be attending that week.
- If your child/children are absent on a paid field trip day, the amount will be credited back to your account.
- To avoid the lines on Monday we encourage you to pre pay and plan the Friday before.

Please sign indicating that you have read this and are in agreement to these terms.

Signature Parent/Guardian: _____

Date: _____