

ISC SCHOOL CAMP MONTHLY ENROLLMENT

Child's Name: _____ Grade: _____

Child's Name: _____ Grade: _____

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Listed below are the only dates that we have available for our school camp program this school year. To enroll for any school camp days please fill out this form and submit with payment. Payment is due at the time of enrollment. This form will be sent out each month for the following month. In order to guarantee a place for your child we must receive this form no later the deadline below. We will still accept Enrollment Contracts after that date based only on availability. You will be notified if any days you have selected are full when we process your contract. You may sign up for all the dates you will need in advance or you may do it monthly. We do not accept drop in campers at the school camp. Please put an X to indicate which days you would like to reserve.

OCTOBER: ___ 8

DEADLINE: SEPTEMBER 15

NOVEMBER: ___ 8 ___ 9

DEADLINE: OCTOBER 15

DECEMBER: ___ 26 ___ 27 ___ 28 ___ 31*

DEADLINE: NOVEMBER 15

JANUARY: ___ 21

DEADLINE: DECEMBER 15

FEBRUARY: ___ 18

DEADLINE: JANUARY 15

APRIL: ___ 22 ___ 23 ___ 24 ___ 25 ___ 26

DEADLINE: MARCH 15

CC# _____ Exp. _____ CVV: _____ Zip: _____

This is a contractual agreement. Please review the following information carefully before signing.

- **Payment is due at the time of enrollment.**
- We accept Visa, MC, Discover, checks, money orders, and cash. We do not accept American Express.
- The cost is \$49 per day for the first child, \$45 per day for the second child and \$36 per day for each additional sibling.
- Parents are responsible to pay for all days selected when submitting this form
- Each camper must pay a one-time registration fee for each School Camp year. Please note: If your child attended our 2016 Summer Camp, the \$50.00 registration fee will be waived.
- There are no refunds, cancellations, substitution, or credits on enrollments. If your child is absent for any reason, you will not receive a credit for that day towards another camp day.
- Our Camp Hours are 7:00 am – 6 pm. A fee of \$10 for every 10 minutes after 6:00 you pick up your child will automatically be charged to your account.
- You will be charged a \$25 fee for checks returned for any reason.

PARENT/GUARDIAN AGREES TO:

I, the parent/guardian of _____ have read the above tuition responsibility agreement which shall become my obligation to International Sports Centre. I fully understand this obligation and the reasons for its implementation.

Parent/Guardian Signature: _____ Date: _____