



TIMBERLAKE CHRISTIAN SCHOOL SUMMER DAY CAMP APPLICATION

EXTENDED CARE INFORMATION:

- **AGE:** The Summer Day Camp is for students ages 3-7 years old.
- **DATES:** The Summer Day Camp program will begin on **Wednesday, May 29, 2024**, and will end on **Wednesday, August 7, 2024**. The first day of school for the 2024-2025 school year will be on Monday, August 19, 2024.
- **NO CARE:** There will be **NO** Summer Day Camp August 8 through August 16 due to teacher work week and **NO** Summer Day Camp on **July 4** due to the holiday. Please plan accordingly.

STUDENT INFORMATION:

DATE: ____/____/____

STUDENT'S FULL NAME (First, Middle, Last): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DATE OF BIRTH: ____/____/____ SEX: _____

AGE CLASS LAST COMPLETED: 3 Year Old 4 Year Old 5 Year Old (Kindergarten)
 6 Year Old (1st Grade) 7 Year Old (2nd Grade)

PARENT INFORMATION:

FATHER'S NAME: _____

MOTHER'S NAME: _____

ADDRESS: _____

ADDRESS: _____

HOME PHONE: _____

HOME PHONE: _____

WORK PHONE: _____

WORK PHONE: _____

CELL PHONE: _____

CELL PHONE: _____

EMAIL: _____

EMAIL: _____

SCHEDULE DESIRED: (please check one)

- 5 Full Days** (7:00AM – 5:45PM)
- 5 Half Days** (7:00AM – 12:00PM)
- 3 Full Days** (7:00AM – 5:45PM)

PARENT PERMISSION:

TCS occasionally uses pictures of projects, events and students on our website, brochures, advertising, and social media (Facebook, Twitter, Instagram) to highlight our programs. I give my permission for TCS to use my child's picture in these media.

Yes _____

No

Parent Signature

OFFICE USE ONLY:

Date Received: ____/____/____ Registration Fee Paid: Yes No Amount Paid: _____ Cash: ____ Check #: _____

Documents on File:

Physical Proof of Identity Immunization Records

EMERGENCY CONTACT & AUTHORIZED PICKUP:

STUDENT'S NAME: _____

PARENT INFORMATION:

FATHER'S NAME: _____

MOTHER'S NAME: _____

ADDRESS: _____

ADDRESS: _____

HOME PHONE: _____

HOME PHONE: _____

WORK PHONE: _____

WORK PHONE: _____

CELL PHONE: _____

CELL PHONE: _____

EMAIL: _____

EMAIL: _____

AUTHORIZED PICKUP:

Please list three additional people to contact (if parent(s) cannot be reached) who are emergency contacts and authorized to pick up your child:

NAME: _____

NAME: _____

NAME: _____

HOME PHONE: _____

HOME PHONE: _____

HOME PHONE: _____

CELL PHONE: _____

CELL PHONE: _____

CELL PHONE: _____

RELATIONSHIP TO CHILD: _____

RELATIONSHIP TO CHILD: _____

RELATIONSHIP TO CHILD: _____

MEDICAL RELEASE FORM

STUDENT'S NAME: _____

PHYSICIAN INFORMATION:

STUDENT'S DOCTOR: _____

PHONE NUMBER: _____

ALLERGIES:

Does your child have any food, medication, or environmental allergies? Yes No

Please provide details of reaction and any necessary treatment.

CONDITIONS:

Does your child have any medical conditions we should be aware of? Yes No

If you answered "yes" please provide the details:

MEDICATIONS:

Does your child take medication(s) regularly? Yes No

If you answered "yes" please provide the details:

BIRTH CERTIFICATE:

If Timberlake Christian Schools does not already have a copy of your child's birth certificate, please include a copy with your child's application. This **must** be on file in the school office before your child may attend. To verify that Timberlake Christian Schools has your birth certificate on file please contact Beth Mears at bmears@tcs4u.org.

IMMUNIZATION RECORDS:

If Timberlake Christian Schools does not already have a current/up to date copy of your child's immunization records, please include a copy with your child's application. This **must** be on file in the school office before your child may attend. To verify that Timberlake Christian Schools has your child's immunization records on file please contact Beth Mears at bmears@tcs4u.org.

CURRENT PHYSICAL:

If Timberlake Christian Schools does not already have a copy of your child's physical (completed within the last year), please include a copy with your child's application. This **must** be on file in the school office before your child may attend. To verify that Timberlake Christian Schools has your child's physical on file please contact Beth Mears at bmears@tcs4u.org.

PERMISSION TO TREAT:

In case of serious illness, I request the school contact me and I agree to pick up my child within a reasonable amount of time. If unable to reach me, I hereby authorize the school to contact my emergency contact or my physician and to follow his/her instructions. If it is not possible to contact the physician, the school may make whatever arrangement necessary for the benefit of my child:

Father's Signature

Date

Mother's Signature

Date

FINANCIAL AGREEMENT

STUDENT NAME: _____

DATE: _____

* **TUITION & FEES**

Registration Fee: \$55.00

The Registration Fee secures students placement in the Summer Day Camp and is due with application.

SUMMER TUITION SCHEDULE:

Schedule	Hours	One Payment by May 15 th via FACTS or by check	Three Payments (May 15 th – July 15 th) via FACTS	Six Payments (May 15 th – July 31 st) via FACTS
5 Full Days	7:00AM – 5:45PM	\$1,700.00	\$566.67	\$283.33
5 Half Days	7:00AM – 12:00PM	\$1,400.00	\$466.67	\$233.33
3 Full Days	7:00AM – 5:45PM	\$1,400.00	\$466.67	\$233.33

FACTS is an automated payment system that will be processing all monthly tuition payments for the Summer Day Camp. Payments are made via an automatic draft from a checking, savings or credit card. There is a convenience fee associated with the credit card option only.

* **PAYMENT OPTION:**

Please select one of the following payment options:

- Pay in Full via Check (May 15) Pay in Full via FACTS (May 15)
- Pay in 3 monthly payments (May 15-July 15) Pay in 6 bi-monthly payments (May 15-July 31)

* **FINANCIAL POLICIES:**

- I/We promise to pay our tuition amount in its entirety to Timberlake Christian Schools by the due date to keep our account in good standing. We understand that our student(s) will be unable to start school unless we have paid our tuition in full or we have set up a monthly payment agreement with FACTS.
- Any payments that cannot be processed by the 15th of the month will be assessed a \$25.00 late fee by TCS, in addition to the fees charged by FACTS and our bank.
- We understand that TCS does not accept CASH payments for tuition.
- The student(s) listed on the account that becomes past due by 30 days from their normal payment date is subject to dismissal from Timberlake Christian Schools until the account is made current.
- All signed contracts with Timberlake Christian Schools are legally binding through the dated period assigned to each.
- We understand that diplomas, report cards, medical information, or transcripts cannot be released if our account is past due.

* **PARENTAL COOPERATION:**

- I understand that my child will be expected to participate in school sponsored activities and if I do not wish my child to participate it is my responsibility to arrange for care at my expense and that I will not be refunded any fees should I do so.
- I understand that the Summer Day Camp hours are 7:00am-5:45pm for full day camp and 7:00am-12:00pm for half day camp and I am expected to pick up my child no later than 5:45 pm for full day and 12:00 pm for half day. If late I will be charged a late pick up fee per child of \$10.00 per 15 minutes or portion of the 15 minutes that I am late.
- I understand that all necessary documents (application, financial agreement, proof of birth, physical and immunization records) must be on file before my child can start the Summer Day Camp program.

* **WITHDRAWAL POLICY: If the contracted parties request early withdrawal of a student for any reason:**

- There will be no refund for withdrawing early for vacation.
- Prior to the completion of the first week of camp: a \$55 administrative fee and no tuition is owed.
- After the first week of camp: \$55 administrative fee, plus a withdrawal fee of 30% of the remaining tuition due (based on remaining days of the program) is owed.
- Executive Committee has full authority over all contracts and has created this policy as they will no longer be accepting contract exceptions. No records will be released until withdrawal fees are paid.

We, the parents, or guardians agree to enroll the above name student for the Summer Day Camp 2024 and agree to pay Timberlake Christian School the tuition fee. I have read and agree to the above financial agreement.

(Signed by both parents (if child resides with both) or legal guardian)

Father's Signature: _____ Mother's Signature: _____

Guardian's Signature: _____

**Parent/Guardian must initial next to these lines*