



# Preschool – 5th Grade Summer Camp Registration Form 2019

Please select the weeks your child will attend.

All forms must be returned by **May 10, 2019 ALONG WITH THE REGISTRATION FEE** to:  
St. Mark Lutheran School Attn: Brenda Palacios 1515 Hillendahl Blvd., Houston, Texas 77055

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ (must be 4 years or older)

DOB \_\_\_\_\_ Grade Completed \_\_\_\_\_ T-shirt Size \_\_\_\_\_ (Youth XS – Adult L)

**Week 1 – WILD about Summer**

June 3-7 M-F ( ) MWF ( ) TTH ( )

**Week 6 – WILD under the Big Top**

July 8-12 M-F ( ) MWF ( ) TTH ( )

**Week 2–VBS: ROAR- Life is Wild, God is Good**

June 10-14 M-F ( ) MWF ( ) TTH ( )

**Week 7 – WILD about Knights & Princesses**

July 15-19 M-F ( ) MWF ( ) TTH ( )

**Week 3 – WILD about Science**

June 17-21 M-F ( ) MWF ( ) TTH ( )

**Week 8 – WILD about Camping**

July 22-26 M-F ( ) MWF ( ) TTH ( )

**Week 4 – WILD about Sports**

June 24-28 M-F ( ) MWF ( ) TTH ( )

**Week 9- WILD about Texas**

July 29-Aug 2 M-F ( ) MWF ( ) TTH ( )

**Week 5- WILD Party in the USA**

July 1-5 M,T,W,F ( ) MWF ( ) T ( )

(Closed on Thursday, July 4, tuition is:  
M,T,W,F \$184, MWF \$165 or T \$60)

**Care will not be available from August 5<sup>th</sup>-13<sup>th</sup>**

**Summer camp hours:  
7 am - 6 pm**

### Contractual Agreement:

We, the undersigned, agree to fulfill all financial obligations as required by St. Mark Lutheran School.

- All Registration Fees are non-refundable.
- Summer Camp Fees shall be charged for the entire week in which the student is registered.
- **All payments are processed through the online TADS system. Tuition is due on the 5<sup>th</sup> of each month for the entire month** (i.e. June 5<sup>th</sup> payment in full for month of June). **A \$35 fee will be charged for late payments.** If payment is not made by the 7<sup>th</sup>, your child will not be able to attend until the account is settled in full. A \$35 charge will be assessed for all returned payments.
- Due to staffing ratios required by Daycare Licensing, two week's advance notice is required if you request a change in your child's schedule. **If changes are made to your child's schedule without two week's advance notice, parents will still be responsible for payment.** Parents are responsible for notifying the Director, **in writing**, if changes need to be made to their child's schedule.
- St. Mark does not pro-rate tuition fees if your child misses part of a registered week. Parents are responsible for the full tuition for each week their child is registered regardless of actual attendance.

### Fees and Discounts

- Registration/Activity Fee - \$100 per child (Non-refundable)
- Tuition Fees:
  - Monday - Friday - \$230
  - Monday, Wednesday and Friday - \$165
  - Tuesday, Thursday - \$120
- Second Child Discount of \$25 offered for the second child enrolled full-time (Monday - Friday).

\_\_\_\_\_  
Signature of parent or legal guardian

\_\_\_\_\_  
Date





# Summer Camp Student and Emergency Information 2019

Child's Name \_\_\_\_\_ DOB \_\_\_\_\_ Grade Completed \_\_\_\_\_

## PARENT/GUARDIAN INFORMATION

<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian Name _____ Address _____ City _____ Zip _____ Work Number _____ - _____ - _____ Cell Phone _____ - _____ - _____ Pager Number _____ - _____ - _____ Email _____ Driver's License # _____ Employer _____ Occupation _____ <input type="checkbox"/> Child's Primary Address	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian Name _____ Address _____ City _____ Zip _____ Work Number _____ - _____ - _____ Cell Phone _____ - _____ - _____ Pager Number _____ - _____ - _____ Email _____ Driver's License # _____ Employer _____ Occupation _____ <input type="checkbox"/> Child's Primary Address
<b>PARENTS MARITAL STATUS:</b> <input type="checkbox"/> Married <input type="checkbox"/> Single	<b>IF ONLY ONE PARENT HAS CUSTODY OF THE CHILD, WE MUST HAVE A COURT ORDER ON FILE FOR THE AGREEMENT TO BE HONORED.</b>

**When parent/guardian cannot be reached, please contact the following person(s) in the order listed. I authorize my child to be released to the following persons:**

*Please type or print (Person other than parent or guardian)*

<b>1</b>	Name _____ Relationship _____ Home Phone _____ Work Number _____ Cell Phone _____
<b>2</b>	Name _____ Relationship _____ Home Phone _____ Work Number _____ Cell Phone _____

\_\_\_\_\_  
Signature of parent or legal guardian

\_\_\_\_\_  
Date





# Summer Camp Student and Emergency Information 2019

## AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION/FIRST AID

In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize St. Mark Lutheran School and Extended Care Staff person in charge to take my child to:

Physician \_\_\_\_\_ Phone \_\_\_\_\_ Address \_\_\_\_\_

Insurance Company \_\_\_\_\_ Policy/Account/Group # \_\_\_\_\_

ID Number/Policy Owner SSN \_\_\_\_\_ Insurance Claims Phone \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_ Phone \_\_\_\_\_

**Nearest Emergency Room (to be used if no other hospital is listed)**

Memorial Hermann Hospital 921 Gessner Road Houston, Texas 77024

List any special problems that your child may have, such as allergies, existing illness, previous serious illness, injuries during the last 12 months, medication prescribed for long-term continuous use and any other information of which staff should be aware (*If no conditions apply, please state "NONE"*):

I hereby  **GIVE**  **DO NOT GIVE** - consent for the school nurse or other designated staff to administer first aid and/or medication to my child.

Comments: \_\_\_\_\_

My child's immunization record is on file at St. Mark Lutheran School (1515 Hillendahl, Houston, Texas 77055, 713 468 2623) or is attached hereto and all immunizations and tuberculosis tests are current.

\_\_\_\_\_  
Signature of parent or legal guardian

\_\_\_\_\_  
Date

## AUTHORIZATION FOR ACTIVITIES

**TRANSPORTATION:**

I hereby  **GIVE**  **DO NOT GIVE** - consent for my child to be transported and supervised by school faculty/staff, St. Mark parents and/or Summer Camp staff on field trips.

**WATER ACTIVITIES:**

I hereby  **GIVE**  **DO NOT GIVE** - consent for my child to participate in water activities (splash pools/wading pools/swimming pools).

**FIELD TRIPS:**

I hereby  **GIVE**  **DO NOT GIVE** - consent for my child to participate in field trips.

**PHOTO RELEASE:**

I hereby  **GIVE**  **DO NOT GIVE** - permission for my child to be photographed or video taken in the school, at school functions and on field trips and for those photographs/video to be used in advertisement, displayed on school bulletin boards, the St. Mark Newsletter "The Cougar" and on the St. Mark School website. (*When any pictures of students do appear on the website there will not be personal identification of any student name.*) I understand that School staff, professional photographers, news media or other parents may take the photographs. I consent that such photographs and or videos shall be the property of St. Mark Lutheran School, which has the right to duplicate, reproduce and make other uses as St. Mark Lutheran School deems necessary.

\_\_\_\_\_  
Signature of parent or legal guardian

\_\_\_\_\_  
Date