



## Mt. St. Mary's Summer Camp Registration

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Grade for 2018 -2019 school year: \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Parent/Guardian's Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### **Camp Choices      Week 1: June 18 - 22**

Introduction to programming/Robotics 10-12 pm \_\_\_\_\_      Intro to CAD 12:30 - 2:30 \_\_\_\_\_

Cooking and Art 9-12 pm \_\_\_\_\_      Fitness-Dance Fusion 9-12 pm \_\_\_\_\_

### **Camp Choices      Week 2: June 25 -29**

Basketball 1-4 pm \_\_\_\_\_      Fitness-Dance Fusion 1-4 pm \_\_\_\_\_      Hands on Steam 1-4pm \_\_\_\_\_

Cooking Camp 1 - 2:30 pm \_\_\_\_\_

**Do you need after camp day care?** \_\_\_\_\_ \$5/hour.

**Week 1:** Day care from 12 - 4pm. Campers need to bring a lunch.

**Week 2:** Day care from 12:30 - 1pm (lunch and break after Faith Camp)

Total cost: \_\_\_\_\_

### **Registration Deadline: June 8th**

Physician's name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Insurance Name and Policy: \_\_\_\_\_

Special Medical condition(s) regarding my child: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_

### **Make Check Payable to Mt. St. Mary's**

Send registration form and payment to:

Mt. St. Mary's Academy  
400 S Church St.  
Grass Valley, CA 95945  
Phone: (530)273-4694