

SUMMER PROGRAM ENROLLMENT FORM

Apostles Learning Center
6025 Glenridge Drive, N.E., Atlanta, GA 30328
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Office Use Only

Date of Entry _____
Class: Summer Camp
Check # _____ Amt _____

Please Print Clearly

Name of Child _____ Name Used _____

Date of Birth _____ Age _____ Grade Level _____

Address _____ City _____ State _____ Zip _____

Parent's/Guardian Name _____ Home Phone _____

Where Employed _____ Bus. Phone _____ Cell _____

Employment Address _____ City _____ State _____ Zip _____

Email Address _____

Parent's/Guardian Name _____ Home Phone _____

Where Employed _____ Bus. Phone _____ Cell _____

Employment Address _____ City _____ State _____ Zip _____

Email Address _____

I give permission that my child may be released to the person (s) below (Must include name, phone number and relationship to parent/ guardian) :

1. _____

2. _____

3. _____

Emergency contacts when parents/ guardians cannot be reached: (Must include name, phone number and relationship to parent/ guardian):

1. _____

2. _____

3. _____

In the event that none of the above can be reached, I authorize ALC to seek emergency treatment if needed.

Does your child have any allergies or chronic medical problems? _____ If so, please name _____

Symptoms exhibited? _____

Are there any medical, mental, or emotional problems of which we should be aware? _____

Does your child require any dietary modifications? _____ If so please list: _____
(A written note is required by licensing to be on file from a doctor if for medical reasons or from parents if for religious reasons)

Meals (breakfast, lunch, and afternoon snacks) are provided each day at no additional cost. **A registration fee of \$65.00 is required to secure your child's place in our summer enrichment program. I understand that if my child does not begin enrollment during the first week indicated, my registration fee is non-refundable. I also understand that if my weekly tuition is not received by 6 p.m. on Tuesday, a late fee of \$10 will be charged.**

Tuition: 225.00 per week

*Camp session begins Tuesday, May 29th through Friday, August 4th.
(Closed Monday, May 29th for Memorial Day & Tuesday, July 4th for Independence Day)

My child will attend camp these following weeks:

May 29th _____	June 19th _____	July 10th _____	Jul 31st _____ (ALC Pre-K Students Only)
June 5th _____	June 26th _____	July 17th _____	
June 12th _____	July 3rd _____	July 24th _____	

PARENT SIGNATURE _____ **DATE** _____