



Summer Tot Time 2009

Summer Tot Time is a program for two & three year olds to enjoy summer mornings with friends. Indoor activities will include circle time, music, art projects, storytime and snack. Free play and sports will be outdoors. Bring bathing suits for sprinklers. Summer Tot Time hours are 9:00AM to 11:45AM.

Child's Name (First) _____ (Last) _____ Male Female

Member # _____ or Credit Card # _____

Date of Birth _____ E-Mail Address _____

Address _____ Home Phone _____ Cell _____

City/State/Zip _____ Children to Be Grouped With _____

Mothers Name (First & Last) _____ Mother's Work/Cell Phone _____

Fathers Name (First & Last) _____ Father's Work/Cell Phone _____

Please indicate attendance by checking the appropriate boxes (Minimum 2 weeks per campers)

Week	Week of	5-Days		Mon., Wed., Fri		Tues., Thurs.		Weekly Cost
		Member	Non-Mem	Member	Non-Mem	Member	Non-Mem	
1	June 8-12	<input type="checkbox"/> \$140.	<input type="checkbox"/> \$200.	<input type="checkbox"/> \$85.	<input type="checkbox"/> \$120.	<input type="checkbox"/> \$60.	<input type="checkbox"/> \$80.	
2	June 15-19	<input type="checkbox"/> \$140.	<input type="checkbox"/> \$200.	<input type="checkbox"/> \$85.	<input type="checkbox"/> \$120.	<input type="checkbox"/> \$60.	<input type="checkbox"/> \$80.	
3	June 22-26	<input type="checkbox"/> \$140.	<input type="checkbox"/> \$200.	<input type="checkbox"/> \$85.	<input type="checkbox"/> \$120.	<input type="checkbox"/> \$60.	<input type="checkbox"/> \$80.	
4	June 29-July 3	<input type="checkbox"/> \$140.	<input type="checkbox"/> \$200.	<input type="checkbox"/> \$85.	<input type="checkbox"/> \$120.	<input type="checkbox"/> \$60.	<input type="checkbox"/> \$80.	
5	July 6-10	<input type="checkbox"/> \$140.	<input type="checkbox"/> \$200.	<input type="checkbox"/> \$85.	<input type="checkbox"/> \$120.	<input type="checkbox"/> \$60.	<input type="checkbox"/> \$80.	
6	July 13-17	<input type="checkbox"/> \$140.	<input type="checkbox"/> \$200.	<input type="checkbox"/> \$85.	<input type="checkbox"/> \$120.	<input type="checkbox"/> \$60.	<input type="checkbox"/> \$80.	
7	July 20-24	<input type="checkbox"/> \$140.	<input type="checkbox"/> \$200.	<input type="checkbox"/> \$85.	<input type="checkbox"/> \$120.	<input type="checkbox"/> \$60.	<input type="checkbox"/> \$80.	
8	July 22-31	<input type="checkbox"/> \$140.	<input type="checkbox"/> \$200.	<input type="checkbox"/> \$85.	<input type="checkbox"/> \$120.	<input type="checkbox"/> \$60.	<input type="checkbox"/> \$80.	
9	August 3-7	<input type="checkbox"/> \$140.	<input type="checkbox"/> \$200.	<input type="checkbox"/> \$85.	<input type="checkbox"/> \$120.	<input type="checkbox"/> \$60.	<input type="checkbox"/> \$80.	
10	August 10-14	<input type="checkbox"/> \$140.	<input type="checkbox"/> \$200.	<input type="checkbox"/> \$85.	<input type="checkbox"/> \$120.	<input type="checkbox"/> \$60.	<input type="checkbox"/> \$80.	

Credit Card Number must be on file for non-members

TOTAL _____
DEPOSIT _____
<i>Half of payment is due at time of Registration</i>
May 31 st : BALANCE DUE _____

PARENT OR GUARDIAN CONSENT:

I hereby give consent for my child to participate in the camp program at Saw Mill Club. I certify that I know of no physical problems or conditions which would impair my child from participating in the program. If necessary, I authorize the persons in charge to secure first aid and/or the services of any legally qualified physician or hospital, and agree to assume all financial obligations connected therewith.

Signed _____ Date _____