

The Tauber Academy

baby university

summer camp program

June 14-August 6, 2010

2010 APPLICATION

Camper's Name: _____ Sex: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____

Date of Birth ___/___/___ Age: _____ Current class room # _____
Mom's Name: _____ Mom's Work Telephone: _____ Mom's Cell phone: _____

Dad's Name: _____ Dad's Work Telephone : _____ Dad's Cell phone: _____

2010 Fee Schedule

8:30 am -6:00 pm	\$2,300.00	<i>*\$200.00 non-refundable registration fee must accompany all applications. If received by February 26, 2010, this fee will be applied towards camp balance.</i> <i>**Applications will only be accepted if school fees have been paid up to date.</i>
8:30 am -3:15 pm	\$1,850.00	
8:30 am -12 noon	\$1,150.00	
Afternoon Extended Care	Daily \$14.00	from 3:15-6:00

*Please complete all information
requested on the reverse side of
this application.*



MEDICAL INFORMATION

ALLERGIES AND RESTRICTIONS: _____

Is your child currently taking any medication? If yes, what? _____

RELEASES

I hereby authorize Camp Discovery to take my child to a doctor or hospital for any Emergency treatment necessary.

Signature of Parent: _____ Date: _____

AUTHORIZATION

The following individuals are hereby authorized to pick-up my child from Camp Discovery 2010. Please be aware that any person picking up will be asked to present photo identification the first time they enter the camp office. Please notify them of our policy.

Name/Relationship Phone

Name/Relationship Phone

Name/Relationship Phone

Name/Relationship Phone

Name/Relationship Phone

Name/Relationship Phone

EMERGENCY CONTACTS

In case of emergency, local contacts other than parent or guardian:
(*This must be filled out!)

1. Name: _____ Relationship: _____ Phone: _____

2. Name: _____ Relationship: _____ Phone: _____

3. Name: _____ Relationship: _____ Phone: _____

Family Doctor: _____ Phone: _____

SPECIAL INFORMATION

Please help us to make this camp experience an enjoyable one. Please provide information about your child. Is there anything that might scare your child, his or her likes or dislikes, changes within the family; new baby, illness, custody restrictions, marriage or divorce? Please be sure to update this information as necessary.

PAYMENT INFORMATION

A non-refundable \$200.00 registration fee must accompany this enrollment form.
All camp fees must be paid in full by May 14, 2010.

I understand that if my camp balance is not paid in full by May 14, 2010, I will forfeit my child's reserved space at Camp Discovery.

I understand and agree to the above policies of Camp Discovery regarding payment of camp fees.

Parent's Signature

Date

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Supply List

Please bring the following items to camp.
• **EVERYTHING MUST BE LABELED!**

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- Daily-Bottles, formula, baby food, etc
 - Bib
 - Burping cloths
 - Pack and Play port-a-crib
 - Crib sheet
 - Sleeping materials (no pillow)
 - Labeled pack of diapers
 - One box of wipes
 - Diaper cream
 - One change of clothing
 - Ziploc baggies: one package sandwich size, one package gallon size, and one box Extra Large
 - One box of Kleenex
 - Two photographs of your child

Please label everything your child brings to camp.
We will send home sleeping materials every Friday to be laundered.

We are looking forward to a great summer. Thanks for your support!
Baby University Staff
