

2014 ACA Youth Summer Camp – CANTON/PLYMOUTH

Registration Form

New Location!!

Risen Christ Lutheran Church
46250 Ann Arbor Rd W, Plymouth, MI 48170

Schedule:

9:00AM-3:30PM, Monday-Friday, 7/14-8/1 (Before and after program extended care is available)

Camper's Name

(English) _____

(Chinese) _____

Date of Birth: ____/____/____ Gender: F M

Grade (entering in fall) _____

Address _____
Street City State Zip Code

Telephone Number (Home) _____

Returning Camper YES NO If yes, year(s) attended: _____

Food Allergy _____

Special Health Needs _____

Father's name

(English) _____ (Chinese) _____

Telephone Number (O) _____ (Cell) _____

Mother's name

(English) _____ (Chinese) _____

Telephone Number (O) _____ (Cell) _____

Primary e-mail address: _____

Emergency Contact (Other than parents)

(English) _____ (Chinese) _____

Telephone _____

If your child is **not** attending for the full 3 weeks, please list what dates he/she will be attending:

Fee Information

1. \$135/\$125 (2nd child) per week, or \$38/\$35 (2nd child) per day. Discount for full 3-week attendance: \$395/\$365 (2nd child). Camp fee includes a daily lunch.
2. **New!!** Registration received on or after 7/7/2014 will be \$140/\$130 per week, or \$40/\$37 (2nd child) per day. \$410/\$380 for full 3-week.
3. \$15 non-refundable registration fee per child. The registration fee includes a T-shirt.
4. Field trip fees are not included in the camp fee. Fee will be collected at the camp orientation.
5. Camp fees are refundable before 3:00PM, June 13, 2014, and are due at the time of registration. After June 13th there will be no refunds, but camp credit will be offered if we receive 2-week notice. Campers will not be credited for absences during the camp.
6. All fees need to be paid by check. **No cash will be accepted. Please make all checks payable to:**
Association of Chinese Americans, Inc.
7. "Extended Pass": Extended care provides extra hours for those children who need to be dropped off between 8:00AM to 9:00AM or picked up between 3:30PM and 6:00PM. The charge is \$2 per AM session and \$4 per PM session. An optional discount is available for campers who attend Extended Care frequently. "Extend Pass" is offered to all campers at \$45 (half price!!) to use all AM/PM sessions throughout the camp. All before and after care fees are due at registration.
8. A receipt will be issued within one month after the camp.
9. To secure your child's space, please submit the entire application and the payment at registration. ACA reserves the right to make changes to camp activity and schedules. **Confirmation will be sent out two weeks prior to the camp.** You may also call to check the registration status. The number is 248-585-9343.

I have read the information about the camp fees and agree to abide by the terms mentioned in it.

Parent's Signature: _____

Date: _____

Payment Worksheet (One form per child please)

Please fill out this form and mail it along with payment* to:

Association of Chinese Americans
Chinese Community Center
32585 Concord Drive
Madison Heights, MI 48071
(248) 585-9343

Camper's name: _____

Camp fee includes a daily lunch.

Registration fee: \$15 (non-refundable) = \$ _____

Camp fee (full 3-week session): \$395/\$365 (if registering before 7/7/14) = \$ _____

Camp fee (full week): \$135/\$125 x _____ weeks (if registering before 7/7/14) = \$ _____

Daily Camp fee (per day): \$38/\$35/day x _____ days (if registering before 7/7/14) = \$ _____
(List the specific dates on page 1)

Camp fee (full 3-week session): \$410/\$380 (if registering on/after 7/7/14) = \$ _____

Camp fee (full week): \$140/\$130 x _____ weeks (if registering on/after 7/7/14) = \$ _____

Daily Camp fee (per day): \$40/\$37/day x _____ days (if registering on/after 7/7/14) = \$ _____
(List the specific dates on page 1)

Extended care

"Extended Pass": \$45 (good for all AM & PM sessions in all 3 weeks) = \$ _____

Daily extended care AM (if needed) \$2/day x _____ days = \$ _____

(List all the dates: _____)

Daily extended care PM (if needed) \$4/day x _____ days = \$ _____

(List all the dates: _____)

Total Fee = \$ _____

- **This total amount does not include field trip fees.**

Select camp shirt size (kid sizes): XL L M S

* Please make check payable to: **Association of Chinese Americans, Inc.**

Office Use Only

Date received: _____

Check #: _____

Received by: _____