

Peninsula Children's Learning Center **2016 Summer Day Camp** Application Schedule Preference Form

Child/ Children's Names _____

Parent/ Caregiver's Name(s) _____

Application Date _____

Application Received: _____

Office Use Only

Please select your desired attendance below. If you select 3 days, please specify which days by circling.

Week 1: June 20-24

- 5 days
- 3 days M T W R F

Week 2: June 27- July 1

- 5 days
- 3 days M T W R F

Week 3: July 5-8

- 4 days
- 3 days M T W R F

Week 4: July 11-15

- 5 days
- 3 days M T W R F

Week 5: July 18-22

- 5 days
- 3 days M T W R F

Week 6: July 25-29

- 5 days
- 3 days M T W R F

Week 7: August 1-5

- 5 days
- 3 days M T W R F

Week 8: August 8-12

- 5 days
- 3 days M T W R F

Camp Attendance Only 9am-4pm \$225 per week/5 days \$150 per week/ 3 days

If you would like **BEFORE CARE** from 6:30-9:00am for an additional \$20 per week, please select below:

- Week 1: yes no
- Week 2: yes no
- Week 3: yes no
- Week 4: yes no
- Week 5: yes no
- Week 6: yes no
- Week 7: yes no
- Week 8: yes no

If you would like **AFTER CARE** from 4:00pm-6:00pm for an additional \$20 per week, please select below:

- Week 1: yes no
- Week 2: yes no
- Week 3: yes no
- Week 4: yes no
- Week 5: yes no
- Week 6: yes no
- Week 7: yes no
- Week 8: yes no