

2010 SIMPLY SUMMER REGISTRATION

Child's name _____

Date of Birth _____ School _____ Grade 9/10 _____

Home Address _____

Father/guardian _____

Father's work phone _____ cell _____ e-mail _____

Mother/guardian _____

Mother's work phone _____ cell _____ e-mail _____

PROGRAM SELECTIONS: Select all programs that apply for this camper

My child is enrolling in DAY CAMP *only* for weeks:

\$140/week
(due each Monday)

- | | | |
|--|--|---|
| <input type="checkbox"/> <i>June 7-11</i> | <input type="checkbox"/> <i>July 5-9</i> | <input type="checkbox"/> <i>August 2-6</i> |
| <input type="checkbox"/> <i>June 14-18</i> | <input type="checkbox"/> <i>July 12-16</i> | <input type="checkbox"/> <i>August 9-13</i> |
| <input type="checkbox"/> <i>June 21-25</i> | <input type="checkbox"/> <i>July 19-23</i> | |
| <input type="checkbox"/> <i>June 28-July 2</i> | <input type="checkbox"/> <i>July 26-30</i> | |

My child is enrolling in DAY CAMP *and* EXTENDED DAY for weeks:

\$190/week
(due each Monday)

- | | | |
|--|--|---|
| <input type="checkbox"/> <i>June 7-11</i> | <input type="checkbox"/> <i>July 5-9</i> | <input type="checkbox"/> <i>August 2-6</i> |
| <input type="checkbox"/> <i>June 14-18</i> | <input type="checkbox"/> <i>July 12-16</i> | <input type="checkbox"/> <i>August 9-13</i> |
| <input type="checkbox"/> <i>June 21-25</i> | <input type="checkbox"/> <i>July 19-23</i> | |
| <input type="checkbox"/> <i>June 28-July 2</i> | <input type="checkbox"/> <i>July 26-30</i> | |

In addition, my child is enrolling in the following SPECIAL CAMPS: **Individual Fees Apply**
(due before attendance)

SWIMMING: \$50/wk ART: \$60/wk TENNIS:\$50/wk KARATE: \$40/wk

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> <i>June 7-11</i> | <input type="checkbox"/> <i>June 7-11</i> | <input type="checkbox"/> <i>July 12-16</i> | <input type="checkbox"/> <i>June 7-11</i> |
| <input type="checkbox"/> <i>June 14-18</i> | <input type="checkbox"/> <i>June 14-18</i> | <input type="checkbox"/> <i>July 19-23</i> | <input type="checkbox"/> <i>June 21-25</i> |
| <input type="checkbox"/> <i>June 21-25</i> | <input type="checkbox"/> <i>June 21-25</i> | <input type="checkbox"/> <i>July 26-30</i> | <input type="checkbox"/> <i>July 26-30</i> |
| <input type="checkbox"/> <i>June 28-July 2</i> | | <input type="checkbox"/> <i>August 2-6</i> | <input type="checkbox"/> <i>August 9-13</i> |

DANCE: \$50/wk DRAMA/MUSIC \$50/wk PHOTOGRAPHY: \$55wk

- | | | |
|--|---|--|
| <input type="checkbox"/> <i>July 5-9</i> | <input type="checkbox"/> <i>July 5-9</i> | <input type="checkbox"/> <i>June 28-July 2</i> |
| | <input type="checkbox"/> <i>August 9-13</i> | <input type="checkbox"/> <i>July 19-23</i> |

I HAVE ENCLOSED MY CHILD'S \$25 REGISTRATION FEE.

AN AIKEN PREP SUMMER

MEDICAL INFORMATION AND PERMISSIONS

Child's Name: _____ Sex: _____ DOB: _____ School: _____ Grade: _____

Address: _____ City: _____ State: _____ Zip: _____

Home phone: _____ E-mail: _____

Father/Guardian _____ Cell Phone: _____ Work Phone: _____

Mother/Guardian _____ Cell Phone _____ Work Phone: _____

How did you hear about camp? _____ Please send me _____ additional brochures
_____ info about Aiken Prep

MEDICAL INFORMATION

If parents/guardians cannot be reached, call:

1, _____ Phone: _____

2, _____ Phone: _____

Family Doctor _____ Phone: _____ Dentist: _____ Phone: _____

Indicate any serious medical problems: _____

Camper is allergic to: ___ Penicillin ___ Aspirin ___ Other: _____

I give permission for my child to have non-aspirin pain reliever as needed: ___ Yes ___ No

I give permission for my child to travel with Aiken Prep Simply Summer 2010 on authorized field trips.

Parent/Guardian signature: _____ Date: _____

I hereby waive and release Aiken Prep School from any and all liability for any injuries or illness incurred while attending Simply Summer 2010 programs. I have no knowledge of any physical condition that would be affected by the above named camper's participation in the program.

Parent/Guardian Signature: _____ Date: _____

PHOTOGRAPHY: From time to time Aiken Prep summer campers are photographed during camp activities. Students also are routinely photographed for inclusion in camp-related materials disseminated to the public in print and via the Internet. Parents who do not want their children photographed should contact the Summer Programs Director at 648-3223.

CONDUCT POLICY: Camp relationships are based upon trust, mutual respect and confidentiality. For our children to have a more positive experience, we require: respectful dialogue, appropriate use of equipment, and compliance with safety rules. Aggressive or bullying behavior is unacceptable. We reserve the right to dismiss any camper whose conduct is detrimental to the program, whose needs will not be met within the context of the program, or whose family does not respect the rights of other camp families. No refund will be issued.

NON-DISCRIMINATION POLICY: Aiken Prep School summer program admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students attending the program.