

# Let's Grow Outside

"Outdoor Play, Learning, Growing in Faith"  
Touching Hearts, Changing lives, Sharing the Light of Christ

PO Box 160, Hendersonville, NC 28793  
Phone: 828-692-6516 Fax: 828-697-3288

### How to Apply:

Complete the application and return by mail or fax. You will receive a confirmation letter with health and permission forms to return.

Regular After School hours are from the end of the school day until 6:00 pm. Additional camps will be available on teacher work days and early release days if there is sufficient demand. After School participants will have the privilege of registering first for these programs.

1st Camper's Name \_\_\_\_\_ DOB \_\_\_\_\_ M/F \_\_\_\_\_  
 2nd Camper's Name \_\_\_\_\_ DOB \_\_\_\_\_ M/F \_\_\_\_\_  
 3rd Camper's Name \_\_\_\_\_ DOB \_\_\_\_\_ M/F \_\_\_\_\_  
 Camper(s) Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Camper(s) Home phone \_\_\_\_\_  
 1st Camper's School \_\_\_\_\_ Grade \_\_\_\_\_  
 2nd Camper's School \_\_\_\_\_ Grade \_\_\_\_\_  
 3rd Camper's School \_\_\_\_\_ Grade \_\_\_\_\_  
 Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_  
 Father's work phone \_\_\_\_\_ Mother's work phone \_\_\_\_\_  
 Father's cell phone \_\_\_\_\_ Mother's cell phone \_\_\_\_\_  
 With whom does camper live? \_\_\_\_\_  
 Emergency contact \_\_\_\_\_  
 Emergency contact phone \_\_\_\_\_  
 Parent/Guardian Email Address(s) \_\_\_\_\_

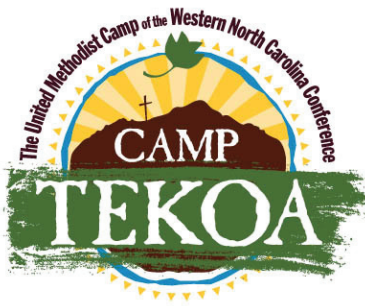
Does the camper have any special needs?  yes  no (special needs can include diet, allergy, disabilities, disorders, etc. Please provide further information on the special needs information form included with your confirmation package. Please note that Camp Tekoa After School is not a special needs program and may not be suited for all individuals with special needs.)

How would you prefer to receive confirmation materials?  email  US mail

### Parent or Guardian Covenant

- I agree to supply a completed Health History form for my camper(s).
- I have read, understand and will comply with the policies and procedures on the following page.
- In case of emergency, the Director or his/her designee has my permission to secure medical attention if unable to contact me immediately.
- I agree that Camp Tekoa is released from liability in connection with medical treatment and unavoidable accidents.
- My child has permission to leave the camp with authorized camp staff for scheduled trips and outings.
- I understand the risks involved in activities my child will choose or has already chosen. I accept all risks including those activities preliminary and subsequent to the chosen activities.
- I give my permission for my child's picture to be used in Camp Tekoa promotional material.
- The Camp Director reserves the right to decline the application of any child, or send home any child who, according to the Director's discretion, is not a desirable associate for the other campers, or puts themselves or others at risk.

Parent/Guardian Signature \_\_\_\_\_



# Let's Grow Outside

## "Outdoor Play, Learning, Growing in Faith"

### Tekoa After School "Let's Grow Outdoors" Program Fees

Our Program will follow the traditional school calendar:

Start Date: August 25, 2009

End Date: June 4, 2010

Registration Fee: Upon acceptance, a **\$40** non-refundable fee per child or **\$50** per family is due.

First Month's Tuition: Each campers first month's tuition is required upon acceptance to secure space. This fee is non-refundable.

Please choose one of the following tuition payment plans:

\_\_\_ Tuition for **Full-time Campers** (5 days a week):

**\$260 per month** (\$13 per day for 180 school days)

9 Equal Payments of \$220 per child, September through May

No monthly tuition for August or June

\_\_\_ Tuition for **Full-time Campers** on **Flex School Schedule** (Hendersonville Elementary School):

**\$213 per month** (\$13 per day for 148 days)

9 Equal Payments of \$213 per child, September through May

No monthly tuition for August or June

\_\_\_ Tuition for **Part-time Campers**:

**\$16 per day** based on availability. Minimum of 3 days a week. Billed on a monthly basis.

#### FOR ALL CAMPERS

1. **Tuition payment is due monthly by the 5th of each month.** After School invoices will run monthly. A late payment fee of \$20 will be assessed to the camp account on the 6th of each month. The courtesy of one month's notice is requested for any child discontinuing the program.

2. **Late pick-up fees:** After School care ends daily at 6:00 pm.

Late pick-up fees will be assessed to the camp account as follows:

**\$10 Late pick-up fee** for each 10 minute increment after 6:01 pm.

Late pick-up fees will appear on the montly invoices and are due upon invoice receipt.

#### Credit Card Payments:

Amount to be charged \$ \_\_\_\_\_ Cardholder signature \_\_\_\_\_

Visa/Mastercard # \_\_\_\_\_ Exp. Date: \_\_\_\_\_ 3 digit security # \_\_\_\_\_

Cardholder name: \_\_\_\_\_

#### 3. Please Select One:

**Transportation:** My child(ren) will be arriving at Camp Tekoa (CT) from:

\_\_\_ Personal vehicle (arrivals may begin at 3:00 pm)    \_\_\_ Atkison Elementary School-CT transport

\_\_\_ Hillandale Elementary School-CT transport    \_\_\_ Hendersonville Elementary School-CT transport

*Thank you for choosing Tekoa's after school program!*