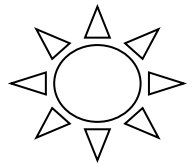




# \*\*\*SUMMER CAMP 2019\*\*\* Western Springs



## GRAND AVENUE PRESCHOOL SUMMER CAMP ENROLLMENT

Child's Name _____	Birth Date _____
Parent's Names _____	Cell/Pager # _____
Address _____	Home Phone # _____
Father's Employment _____	Work Phone # _____
Mother's Employment _____	Work Phone # _____
Emergency Contact _____	Emergency Phone # _____
Child's Doctor _____	Doctor's Phone # _____
Allergies and/or restrictions _____	E-Mail _____

Please put an X by the session(s) you would like to request. We will return this form to your confirming your camps.  
Sessions are Tuesday, Wednesday, and Thursday for two consecutive weeks.

**A.M. 9:00 a.m. -- 11:30 a.m.**       **P.M. 1:00 p.m. -- 3:30 p.m.**

**REQUESTED**

**CONFIRMED**

_____ Session 1 - June 4, 5, 6 & 11, 12, 13	<b>Diggin' Dinos</b>	_____
_____ Session 2 - June 18, 19, 20, & 25, 26, 27	<b>GAP Camps Out</b>	_____
_____ Session 3 - July 1, 2, 3 & 9, 10, 11	<b>Hurray for the Red, White &amp; Blue</b>	_____
_____ Session 4 - July 16, 17, 18 & 23, 24, 25	<b>Fun on the Farm</b>	_____
_____ Session 5 - July 30,31, Aug. 1, & 6, 7, 8	<b>Sun &amp; Sand</b>	_____

Please enclose \$140 per session & \$112 per each sibling attending the same camp. For new students, an Authorization for **Emergency Medical Care and My Child's Biography** must be returned by the first day of camp. If we already have your form on file, but you need to update it, please come into the office for a new form. All forms must be on file by the first day of camp.

**A few notes about camp:** *All children must be toilet-trained.* Please send school bags every day and have your child wear comfortable, safe shoes—please, NO sandals or clogs except on swim suit days. If sunscreen is needed, apply to your child before dropping them off at camp. On the first day of each camp, every family will be issued a "car line" letter or number to be used for picking up their child/ren. There will be no refunds due to cancellations. We look forward to seeing your child in camp. If you have any questions, please call the office.

Western Springs (708) 246-2270      JoAnn Buralli, Director

**OFFICE USE ONLY:**

PAID check # \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ date \_\_\_\_\_

**This is an acknowledgement of your payment and your confirmed summer camp sessions.**  
Summer PS Camp Enrollment. Word (WS)