



# SCHOOLHOUSE OF WONDER

Spring Intersession Camps ~ March 22 – April 9, 2010  
For children ages 5-11

Spring Turtle Camp  
At West Point on the  
Eno Park  
Ages 5-11  
March 22- 26, 2010

Spring Otter Camp  
At West Point on the  
Eno Park  
Ages 5-11  
March 29-April 2, 2010

Spring River Camp  
At West Point on the  
Eno Park  
Ages 5-11  
April 5-9, 2010

Camper's Name \_\_\_\_\_

Male  Female  Birth Date \_\_\_\_\_ Age on arrival at camp \_\_\_\_\_

Camper's Address \_\_\_\_\_

City, State & Zip Code \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Telephone Numbers: Home \_\_\_\_\_ Work \_\_\_\_\_

Cell/Other \_\_\_\_\_

Email (print) \_\_\_\_\_

Other Parent/Guardian Name \_\_\_\_\_

Relationship \_\_\_\_\_

Telephone numbers: Home \_\_\_\_\_ Work \_\_\_\_\_

Cell/Other \_\_\_\_\_ Email (print) \_\_\_\_\_

**We will send camp information to you by email, unless you specify here that you prefer to receive camp information by regular mail. USPS delivery to home address, please \_\_\_\_\_.**

Emergency Contact Name \_\_\_\_\_

Relationship \_\_\_\_\_

Telephone Numbers: Home \_\_\_\_\_ Work \_\_\_\_\_

Cell/Other \_\_\_\_\_

Please tell us of any physical, medical, or emotional conditions your child might have that will require our special attention. Please specify particular challenges/allergies and associated medications or special needs, if any.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**May Schoolhouse of Wonder have permission to use your child's picture in promotional materials? Yes \_\_\_ No \_\_\_**

**CONTRACTUAL ARRANGEMENT BETWEEN SCHOOLHOUSE OF WONDER AND CAMPER'S FAMILY**

**Program Fees:**

I understand: The tuition for week-long camps is \$265 unless otherwise indicated. You may take a discount of \$15 off the second and any additional camps you purchase at the same time. Due to monetary commitments to staff and materials prior to the start of the program, Schoolhouse of Wonder is unable to reserve my space until they receive my registration form with full tuition. A tuition refund minus an administrative fee of \$25 may be available until thirty days prior to the start of the camp, if a replacement can be found for the space, after which no refunds will be available. A \$20 fee will be charged for all returned checks.

**Program Times:**

I understand that camps begin at 9am. Therefore, morning drop-off is scheduled from **8:15–9:00am**. I understand that camps end at 5pm with afternoon pick-up scheduled from **5:00–5:15pm**. I agree to pay Schoolhouse of Wonder 50 cents for every minute after 5:20 that I am late for pick-up.

I understand that there is an early pick-up option for camps. This early pick-up is scheduled for **3:00–3:15pm**.

**Please note: no tuition reduction is offered for those families choosing the early pick-up option. Also, barring emergencies, this is the only time prior to the end of the camp day that we are able to release campers for pick-up.**

I would like the 3:00 early pick-up on the following days of camp:  All  These days \_\_\_\_\_

**Authorization for Emergency Medical Care:**

Should an accident or emergency occur that requires my child to receive medical care, I hereby give permission to the physician selected by Schoolhouse of Wonder staff to hospitalize and/or secure proper treatment for my child, except as noted below. I agree to be liable for these noted exceptions.

Exceptions to Treatment/Hospitalization: \_\_\_\_\_  
\_\_\_\_\_

**Insurance Information:**

Policy Holder's Name \_\_\_\_\_  
Policy Number \_\_\_\_\_ Insurance Company \_\_\_\_\_

My child has my permission to enter into all camp activities. Schoolhouse of Wonder has been given all necessary medical and behavioral information about my child's health and well being.

\_\_\_\_\_  
Printed Name of Parent or Guardian

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

**Please send this completed registration form along with your check made payable to Schoolhouse of Wonder to:**

5101-B N. Roxboro Road  
Durham, NC 27704-1419  
Phone: (919) 477-2116

**T-Shirts**

Purchase a Schoolhouse of Wonder t-shirt for yourself or your child for \$10.

Circle size:

Child S M L

Adult S M L XL

How many? \_\_\_\_\_

Total added to registration fee  
\$ \_\_\_\_\_

**Thank you for signing up for our Intersession Camp! We look forward to seeing you!**

**[www.SchoolhouseOfWonder.org](http://www.SchoolhouseOfWonder.org)**