

2017 CACC Summer Camp Registration Form CAMPER REGISTRATION COVER FORM

FAMILY Registration	Informatio	n						
Parent/								
Guardian Name (print	:	Last			First		Chinaga	lame, if any
		Lasi			FIISL		Crimese N	апте, п апу
Address:	stree							
	stree	Ĭ				city	state	zip
Phone: home ()		work ()		cell (_)	-
Email:						_		
Are you a CACC Memb	er? □NO					dparent member		
			CACC Gran	dparent Nar	ne(s)		Chinese N	lame(s), if any
	*For CACC gra	ndparent enrolln	nent, the CACC gr	andparent(s)	must be an <u>ex</u>	xisting registered	CACC member	as of January 1, 2017.
Are you registering as	an Affiliate*	*? □NO [□YES Organ	ization:				
				ioto Organiza	ation Contact [Porson IID Emplo	voor/studente i	dentify department.
**	CACC #222# /22	the right to verif		_			•	
		-	y eligibility for aπili	ate enrollmer	it. Registrants	s are responsible to	or any additional	costs due to ineligibility.
CAMPER(S) Registra	ilion imom	iation						
CHILD 1 Name:								□male □female
		Last			First			
Other names:					T-9	shirt: □YS [YM □YL	☐ other
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	oreferred or nick		Chinese	name, if any				
Birth date (dd/mm/yyyy):			_ Age:	as	of July 1, 2 0	17. Grade Co	mpleted	
(Sibling)								□mala □famala
CHILD 2 Name:		Last			First			□male □female
Othernemen					т.	ahimt: \texts		□ other
Other names:	oreferred or nick	name, if any	Chinese	name, if any	1-8 ,	snirt. 🗆 13 L		□ otner
Birth date (dd/mm/yyyy):			_ Age:	as	of July 1, 20	17. Grade Co	mpleted	
(Sibling) CHILD 3 Name:								□male □female
		Last			First			
Other names:		name, if any	Chinese	name, if any		shirt: 🗆 YS 🛭	□YM □YL	Other
Birth date (dd/mm/yyyy):						17. Grade Co	mpleted	

For Sibling Child 4+, please complete sibling section of additional sheet(s) and attach.

CACC 2017 Summer Camps: Tuition Schedule Form

Instructions for Completing Form

Step A: Select row with total number of sessions (1, 2, or 3 sessions).

Step B: Select Camp Tuition Rate in row with child's "total number of sessions" (non-mem, affiliate, or CACC).

Step C: Optional - Add Extended Care (AM, PM, or both).

Step D: Write in child's fee (*Tuition + Extended Care, if any*).

Step E: Specify which session week(s) child will attend (pick Session 1, Session 2, and/or Session 3).

Child 1 (print name):	Tuition rates reflect multi-session discounts							
	A. Total Number of Sessions	B. Ca	mp Tuitior	Rates	C. Exter	nded Care	(Add-On)	D. Child #1 Fee
	(Specify sessions in Step*E below)	Non-Mem.	Affiliate**	CACC Mem.	AM Only	PM Only	AM & PM	(Step B + Step C
Open Enrollment	1 session only	□ \$300	□\$280	□ \$270	□ \$ 30	□ \$ 55	□ \$ 75	
Registration and payments		□ \$590	□\$550	□ \$530	□ \$ 30	□ \$ 55	□ \$ 75	
received after March 31, 2017.	\square 3 sessions (-\$10 ea. for 2nd & 3rd)	□ \$880	□\$820	□ \$790	□ \$ 30	□ \$ 55	□ \$ 75	
	_				I		_	 II
XES TO EARLY BIRD Enrollment!!!	☐ 1 session only	□ \$280	□\$270	□ \$260	□ \$ 30	□ \$ 55	□ \$ 75	
Registration and payment must be	2 sessions (-\$10 for 2nd)	□ \$550	□\$530	□ \$510	□ \$ 30	□ \$ 55	□ \$ 75	
received by March 31, 2017 to receive Early Bird Rates.	\square 3 sessions (-\$10 ea. for 2nd & 3rd)	□ \$820	□\$790	□ \$760	□ \$ 30	□ \$ 55	□ \$ 75	
*E. Child will attend the following se	ssion week(s): (check all applic	able)		For office use o	nly:			
☐ Session 1: July 24 - 28 ☐ Session 2:	July 31 - August 4	ion 3: Augu	st 7 - 11					Child 1

Sibling Enrollment Section: No child listed in Sibling Enrollment Section may be registered for more sessions than Child 1. Child 2 (print name): A. Total Number of Sessions B. Camp Tuition Rates C. Extended Care (Add-On) D. Child #2 Fee (Specify sessions in Step*E below) Affiliate** CACC Mem AM Only PM Only AM & PM Non-Mem. Open Enrollment 1 session only □\$270 □ \$ 30 I \$ 55 \$290 □ \$260 Registration and payments 2 sessions (-\$10 for 2nd) \$570 □\$530 **\$510** \$ 55 \$ 75 □\$30 received after March 31, 2017. □\$790 ☐ 3 sessions (-\$10 ea. for 2nd & 3rd) \$850 □ \$760 □\$30 \$ 55 \$ 75 □ \$ 30 □ \$ 55 1 session only \$270 **\Backsigner**\$260 □ \$250 \$ 75 YES TO EARLY BIRD Enrollment!!! □\$510 □ \$490 2 sessions (-\$10 for 2nd) \$530 □ \$ 30 □ \$ 55 \$ 75 Registration and payment must be received by March 31, 2017 to receive Early Bird Rates. 3 sessions (-\$10 ea. for 2nd & 3rd) 5790 5760 5730 □ \$ 30 □ \$ 55 For office use only: *E. Child will attend the following session week(s): (check all applicable) Sibling Session 2: July 31 - August 4 ☐ Session 1: July 24 - 28 ☐ Session 3: August 7 - 11

Child 3 (print name):	Tuition rates reflect multi-session and sibling discounts							
	A. Total Number of Sessions	B. Ca	mp Tuition	Rates	C. Exter	nded Care	(Add-On)	D. Child #3 Fee
	(Specify sessions in Step*E below)	Non-Mem.	Affiliate**	CACC Mem.	AM Only	PM Only	AM & PM	(Step B + Step C)
Open Enrollment	1 session only	□ \$290	□\$270	□ \$260	□ \$ 30	□ \$ 55	□ \$ 75	
Registration and payments		□ \$570	□\$530	□ \$510	□ \$ 30	□ \$ 55	□ \$ 75	
received after March 31, 2017.	☐ 3 sessions (-\$10 ea. for 2nd & 3rd)	□ \$850	□\$790	\$760	□ \$ 30	□ \$ 55	□ \$ 75	
	_	I — . I			I — .	I	I	II .
YES TO EARLY BIRD Enrollment!!!	1 session only	□ \$270	□\$260	□ \$250	□ \$ 30	□ \$ 55	□ \$ 75	
Registration and payment must be	2 sessions (-\$10 for 2nd)	□ \$530	□\$510	□ \$490	□ \$ 30	□ \$ 55	□ \$ 75	
received by March 31, 2017 to receive Early Bird Rates.	☐ 3 sessions (-\$10 ea. for 2nd & 3rd)	□ \$790	□\$760	□ \$730	□ \$ 30	□ \$ 55	□ \$ 75	
*E. Child will attend the following session week(s): (check all applicable)					nly:			
☐ Session 1: July 24 - 28 ☐ Session 2:	July 31 - August 4	on 3: Augus	st 7 - 11	! ! !				Sibling

For Child 4+, complete sibling section of additional sheet(s) and attach.

	SAVE MORE! Join CACC toda	y for CACC Member Summer Camp tuition rates.	☐ \$120 CACC Family Membership (1 year
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**Affiliates, please identify your affiliate organization & contact. If UD employee/students, identify department:	2017 Summer Camp Pavment Summarv:
	Camp Fees \$
Payment type: □ Cash □ Check Check#	CACC Family Membership + \$
Please make check payable to CACC and send to:	TOTAL DUE \$

CACC Summer Camp; PO Box 849; Hockessin, DE 19707