Bread of Life Christian Children Center 2012 Summer Day Camp

2780 Lomita Blvd., Torrance, CA 90505
Phone: 310-602-0185 Fax: 310-325-7853
clfung@breadoflifechurch.org

Registration Form

(For children entering Kindergarten through Grade 8 in September 2012)

Child's name: _____ Birthday: _____ T-shirt Size: (circle one)
Last Name First Name Youth: S M L / Adult

Name of School Attending: _____ Grade in Fall 2012: _____ Sex: _____

Home Address: _____ Home Phone: _____

Name of Father: _____ Work Phone: _____ Cell Phone: _____

Name of Mother: _____ Work Phone:_____ Cell Phone: _____

E-mail address: _____

Emergency Contact: Name: _____ Phone: _____

Other persons authorized to take the child from our facility:

1. Name: _____Phone: _____ 2 Name: _____Phone: _____

Food Restriction: _____

Weeks Attending (please check* and circle your choices**)

Week*	Days**	Field trip**	Week*	Days**	Field trip**
☐ June 18 - 22	MTWThF	Yes/No	☐ July 23 - 27	VBS (5 days)	(No field trip)
☐ June 25 - 29	MTWThF	Yes/No	☐ July 30 -Aug 3	MTWThF	Yes/No
☐ ***July 2 - 6**	MT***W**ThF	Yes/No	☐ August 6 - 10	MTWThF	Yes/No
☐ July 9 -13	MTWThF	Yes/No	☐ August 13 - 17	MTWThF	Yes/No
☐ July 16 -20	MTWThF	Yes/No	☐ August 20 - 24	MTWThF	Yes/No

* **closed** on July 4 (Wednesday) for the Independence Day

Fees

Registration fee: (includes a T-shirt, non-refundable):		$30 registration before May 7th, 2012 $35 registration between May 8th to June 4th, 2012 $40 after June 4th, 2012
Full time fee:	5 full days:	$165/week (includes 2 daily snacks and the weekly field trip)
Part time fee:	2 full days without field trip day	$90/week (includes 2 daily snacks)
	2 full days with field trip day	$105/week (includes 2 daily snacks and the weekly field trip)
	3 full days without field trip day	$125/week (includes 2 daily snacks)
	3 full days with field trip day	$140/week (includes 2 daily snacks and the weekly field trip)
Vacation Bible School Week: 5 Full Day		$110/week **(not include VBS fee)**

Complete the registration form and make check payable to **BOLCCC**.

My child is able to participate in the Summer Day Camp Program described. I agree to notify the Program Director of any physical, medical, emotional, and behavioral conditions and concerns of my child that require special attention. I understand that the Bread of Life Church Summer Day Camp Program reserves the right to require the removal of my child from the program. My child has my permission to attend the religious services or activities that will be held on the premises. I permit the Bread of Life Church to show my child's photos on the website page if needed for BOLCCC Programs Advertisements.

Signature of Parent(s) / Guardian(s)_____ Date: _____