

Can Do Camp 2010

Lake Travis United Methodist Church Preschool
1502 Ranch Road 620 North
Austin, Texas 78734

Your church affiliation: LTUMC _____ Other: _____
Are you currently enrolled in the LTUMC Preschool? Yes ___ No ___.

Student Information:

Child's name: _____ Age: _____ DOB: _____
(Camp age: Born 3/1/09 thru children going to Kindergarten)

Parent's Names: _____ Phone #: _____
Address: _____ Mom's cell: _____
_____ Dad's cell: _____
Family's Email Address: _____

Alternate pick up contacts:

Name: _____ Phone: _____
Name: _____ Phone: _____

Child's Physician: _____ Phone: _____
Preferred Hospital: _____
Previous Hospitalization: _____
Allergies: _____ Routine Medications: _____
Cronic Illnesses: _____
Emergency Contact: _____ Phone: _____

I herby authorize LTUMC Can Do Camp Staff to seek medical treatment for my child in the event I cannot be reached. Camp hours: 9am to 1:00pm.

Please enroll my child in:



_____ Olympic Fun & Fitness – **June 1, 2, 3**



_____ Sensational Science – **June 22, 23, 24**



_____ Princess Castles and Crazy Construction – **July 6, 7, 8**

I understand the tuition for each session is **\$110.00**. A non refundable tuition payment of **\$25.00** per camp is due at the time of registration. The balance of **\$85.00** per camp will be due by May 15, 2010. LTUMC Preschool reserves the right to cancel any class based upon enrollment. You will receive additional camp information via email prior to May 15th.

Parent' signature _____ Date: _____

Check No. _____ Amount \$ _____ (Deposit)
Check No. _____ Amount \$ _____