

# CAMP SELECTIONS

**Indicate week, type of Camp, Use of Extended Care and list Payment Options**

Explorers I (Ages 5-8)     Explorers II (ages 9-12)     One Time Registration FEE \$ 15.00

WEEK	EXTENDED CARE	TOTAL COST	Deposit
<input type="checkbox"/> June 14-June 18	<input type="checkbox"/> \$20	_____	_____
<input type="checkbox"/> June 21- June 25	<input type="checkbox"/> \$20	_____	_____
<input type="checkbox"/> June 28-July 2	<input type="checkbox"/> \$20	_____	_____
<input type="checkbox"/> July 5- July 9	<input type="checkbox"/> \$20	_____	_____
<input type="checkbox"/> July 12- July 16	<input type="checkbox"/> \$20	_____	_____
<input type="checkbox"/> July 19-July 23	<input type="checkbox"/> \$20	_____	_____
<input type="checkbox"/> July 26-July 30	<input type="checkbox"/> \$20	_____	_____
<input type="checkbox"/> August 2-August 6	<input type="checkbox"/> \$20	_____	_____
<input type="checkbox"/> August 9-August 13	<input type="checkbox"/> \$20	_____	_____
<input type="checkbox"/> August 16-August 20	<input type="checkbox"/> \$20	_____	_____
<b>TOTAL</b>	_____	_____	_____

Late Registration Fee \$120.00 applied per week after May 1, 2010 Type of Payment  Cash  Check # \_\_\_\_\_  Money Order# \_\_\_\_\_  
 If a check is returned a \$25.00 returned check fee will be applied and full payment will be due in cash, credit or a postal money order.

Total Amount\$ \_\_\_\_\_ Visa/MC# \_\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Signature: \_\_\_\_\_

**Payment Option 1**  Pay Whole Summer Get 10% Off    **Option 2**  Pay Whole Summer in 3 payment plan Get 5% Off  
**Option 3**  Make 1/2 payments for each week of camp chosen (See Schedule Below)

**Office Use Only:** Date and Amount of Payment(s) Received: \_\_\_\_\_ All registrations will be confirmed by telephone

### PAYMENT SCHEDULE FOR 2010 ADVENTURE CAMP

FIRST DAY OF CAMP	DEPOSIT	1/2 REMAINING BALANCE DUE	REMAINING BALANCE DUE
June 14	\$25.00	May 24th _____ <input type="checkbox"/> payment 1	May 31 _____
June 21	\$25.00	June 7th _____	June 14th _____
June 28	\$25.00	June 14th _____	June 21st _____
July 5	\$25.00	June 21st _____ <input type="checkbox"/> Payment 2	June 28th _____
July 12	\$25.00	June 28th _____	July 5th _____
July 19	\$25.00	July 5th _____	July 12th _____
July 26	\$25.00	July 12th _____	July 19th _____
August 2	\$25.00	July 19th _____ <input type="checkbox"/> Payment 3	July 26th _____
August 9	\$25.00	July 26th _____	August 2nd _____
August 16	\$25.00	August 2nd _____	August 9th _____

Only one packet is needed to register each camper for multiple sessions. Payments are to be made to St. Joseph's Center for Community Service. Camp payments are due in full upon registration OR you may follow the options above. Failure to adhere to the payment plan may result in the loss your space in the program or forfeit the total deposit paid. Registrations received without payment will not be accepted. REFUNDS will only be granted if St. Joseph's is notified in writing **NO LATER** than June 7th, A 20% administration service charge will be imposed for all refunds granted.