



2024 Summer Imagination Camp Registration

Child's Name		Birthdate	Gender (circle one) M F
Address (Street)		School District	
City	Zip	Home Phone ()	Family's Place of Worship

Name of Parent #1		
Home phone number ()	Cell phone number ()	Work phone number ()
Name of Parent #2		
Home phone number ()	Cell phone number ()	Work phone number ()
Email address for Parent #1	Email address for Parent #2	

NOTIFICATION/AGREEMENTS

A. When my child is ill, I understand and agree that my child may not attend sessions at Circle of Friends. Please refer to the HEALTH POLICIES AND PROCEDURES section of the Parent Guidebook for specific information on symptoms.

B. The Missouri Department of Health required inspection form is available for review at the Circle of Friends office.

C. A parent or guardian of a child enrolled in or attending Circle of Friends may request notice of whether there are any children enrolled in the facility with an immunization exemption on file. The names of individual children are confidential and will not be released.

IN CASE OF AN EMERGENCY, CONTACT THE FOLLOWING PERSONS (OTHER THAN PARENTS):			
Name	Relationship to child:	Name	Relationship to child:
Phone ()		Phone ()	

PERMISSION:

I do do not allow my child's photo to be printed and displayed (on bulletin boards, special classroom projects, etc.) within the Circle of Friends Preschool and shared among other COF families in my child's class.

I do do not allow my child's photo to be published through various digital platforms (COF Facebook page, website, promotional videos, etc).

Parent/Legal Guardian Signature	Date
	<div style="border: 1px solid black; padding: 5px; display: inline-block;">OVER</div>

For office use

Date Enrolled _____ Check # _____

Birth Certificate _____ Check Amount _____

2024 Summer Imagination Camps Registration Form

Child's Name	Birthdate	Phone number
Is your child currently potty trained? <div style="display: flex; justify-content: space-around;"> Yes No </div>		Please circle child's T-Shirt Size: <div style="display: flex; justify-content: space-around;"> 3T 4T 5-6 7-8 </div>
June 10-13 Week 1 At the Beach!		
2 Days _____ _____	Mon and Wed 8:30-12:30 Tues and Thur 8:30-12:30	\$75.00 \$75.00
4 Day _____	Mon—Thurs 8:30-12:30	\$150.00
June 17-20 Week 2 In the Ocean Deep—no camp 6/19		
2 Days _____ _____	Mon no camp 6/19 8:30-12:30 Tues and Thur 8:30-12:30	\$37.50 \$75.00
4 Day _____	Mon—Thurs 8:30-12:30	\$112.50
June 24-27 Week 3 Aaarrrrhh Maties—Let's be Pirates		
2 Days _____ _____	Mon and Wed 8:30-12:30 Tues and Thur 8:30-12:30	\$75.00 \$75.00
4 Day _____	Mon—Thurs 8:30-12:30	\$150.00
July 15-18 Week 4 Paris—Olympic Pre-games		
2 Days _____ _____	Mon and Wed 8:30-12:30 Tues and Thur 8:30-12:30	\$75.00 \$75.00
4 Day _____	Mon—Thurs 8:30-12:30	\$150.00
July 22-25 Week 5 Summer Olympics CoF Style		
2 Days _____ _____	Mon and Wed 8:30-12:30 Tues and Thur 8:30-12:30	\$75.00 \$75.00
4 Day _____	Mon—Thurs 8:30-12:30	\$150.00
Total Amount Due (Check or Credit Card, in person only)		+ \$25 Registration Fee

All Enrollment Fees include Tuition and \$25.00 Registration Fee

Please make checks payable to: MUMC Circle of Friends

MUMC CIRCLE OF FRIENDS REFUND POLICY

The registration fee is nonrefundable. Tuition must be paid in advance and is nonrefundable for cancellations after **5/1/2024**. Circle of Friends reserves the right to combine or cancel classes because of insufficient enrollment. For completely cancelled classes, a full refund will be given.

Date _____ Parent Signature _____