



2025 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 Circle of Friends Preschool SICK POLICY on the website: preschoolstl.org/sick for additional guidelines.

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 Number ()		Phone Number ()	

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
	OVER

**Manchester Untied Methodist Church
Circle of Friends Preschool**

2025 Summer Imagination Camps Registration Form

For office use

Date Enrolled _____ Check # _____

Birth Certificate _____ Check Amount _____

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 9—12 Week 1 All Aboard Summer Camp Express!		
2 Days _____ _____	Mon and Wed 8:30-12:30 Tues and Thurs 8:30-12:30	\$75.00 \$75.00
4 Days _____	Mon—Thurs 8:30-12:30	\$150.00
June 16—18 Week 2 Bugs, Butterflies, & Beyond —no camp 6/19		
2 Days _____ 1 Day _____	Mon and Wed 8:30-12:30 Tues only 8:30-12:30	\$75.00 \$37.50
3 Days _____	Mon—Wed 8:30-12:30	\$112.50
June 23—26 Week 3 A Camping We Will Go!		
2 Days _____ _____	Mon and Wed 8:30-12:30 Tues and Thurs 8:30-12:30	\$75.00 \$75.00
4 Days _____	Mon—Thurs 8:30-12:30	\$150.00
July 14—17 Week 4 Summer Palooza		
2 Days _____ _____	Mon and Wed 8:30-12:30 Tues and Thurs 8:30-12:30	\$75.00 \$75.00
4 Days _____	Mon—Thurs 8:30-12:30	\$150.00
July 21—24 Week 5 Magic Kingdom Adventures (Disney Week)		
2 Days _____ _____	Mon and Wed 8:30-12:30 Tues and Thurs 8:30-12:30	\$75.00 \$75.00
4 Days _____	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 **5/1/2025**. 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 _____