



SUMMER CLUB 2017 REGISTRATION FORM

Clubs Will Be Held Rain Or Shine | Space Is Limited | Registration Complete When Forms And Payment Are Received

Name: _____ Circle: Female / Male Entering Grade: _____ DOB: ___/___/___

Parent or Guardian Name (Primary Contact): _____

Address: _____ City: _____ Zip: _____

Work Phone: _____ Home Phone: _____ Cell Phone: _____

E-mail Address: _____

		Full Day 8AM -3PM (\$200)	Half Day 8 – 11AM (\$100)	Half Day 12 -3PM (\$100)
Session I	*June 19– June 23	\$ _____	\$ _____	\$ _____
Session II	June 26–June 30	\$ _____	\$ _____	\$ _____
Session III	July10 – July14	\$ _____	\$ _____	\$ _____
Session IV	July 17 – July 21	\$ _____	\$ _____	\$ _____
Session V	July 24 – July 28	\$ _____	\$ _____	\$ _____
Session VI	July 31 – August 4	\$ _____	\$ _____	\$ _____
Session VII	Aug 7- August 11	\$ _____	\$ _____	\$ _____

Registration Fee: *Registrations received **after March 31st** will be assessed a **\$40 late registration fee.***

**Session I is dependent upon snow days.*

(After March 31st, please include a \$40 late registration fee)

Total Payment \$ _____

**PAYMENT DUE AT TIME OF REGISTRATION: CHECKS (payable to Saint Michael School),
 MASTERCARD & VISA (<https://www.osvonlinegiving.com/1245>) are accepted.**

Please return completed form and payment if by check to Saint Michael School, attention: Kerrie Abate, 80 Maple Ave, North Andover, MA 01845

CANCELLATION & CHANGE POLICY: If you must cancel your registration you will be eligible for a full refund if the cancellation is made **6 weeks** before the camp starting date. I have read and agree to abide by the cancellation policy.

X _____

Signature of parent or guardian Date