



Summer Camp at GPS 2023

Preschool Camp (2½ years old - Kindergarten)

www.GPSschool.org/summer-camp

One form per camper

Camper Name: _____ Grade, Fall 2023 _____ School attending _____

Birthdate: ____/____/____ Gender: M F

Registration and Cost Calculator		# of days	Circle Hours/Days of Attendance each week			Tuition Amount
			8:30-12:30	8:30-2:30	8:30-6:00	
Week 1	June 20 – June 23 (closed Mon., Jun 19)	2 days (WF)	\$120	\$165	\$200	\$ _____
		4 days (TWThF)	\$240	\$330	\$400	
Week 2	June 26 – June 30	3 days (MWF)	\$175	\$250	\$300	\$ _____
		5 days	\$300	\$415	\$500	
Week 3	July 3—July 7 (closed Tue., July 4)	3 days (MWF)	\$175	\$250	\$300	\$ _____
		4 days (MWThF)	\$240	\$330	\$400	
Week 4	July 10—July 14	3 days (MWF)	\$175	\$250	\$300	\$ _____
		5 days	\$300	\$415	\$500	
Week 5	July 17—July 21	3 days (MWF)	\$175	\$250	\$300	\$ _____
		5 days	\$300	\$415	\$500	
Week 6	July 24—July 28	3 days (MWF)	\$175	\$250	\$300	\$ _____
		5 days	\$300	\$415	\$500	
Week 7	July 31—Aug. 4	3 days (MWF)	\$175	\$250	\$300	\$ _____
		5 days	\$300	\$415	\$500	
Week 8	Aug. 7—Aug. 11	3 days (MWF)	\$175	\$250	\$300	\$ _____
		5 days	\$300	\$415	\$500	
Early morning care available 7:30 to 8:30 a.m.			Subtotal of weekly Tuition amounts			\$ _____
\$100 non-refundable deposit due with this registration						- \$100 due now
Balance due no later than Friday before start of camp (Total tuition minus \$100)						\$ _____

A non-refundable registration deposit of \$100 is due with this registration form and is applied toward Camp Tuition. The "Camper Information Form" on the next page is required for each camper. Please note the important information below:

- \$100 non-refundable registration deposit; make checks out to "Chatsworth Hills Academy" (our parent corporation).
- All payments must be made no later than the Friday preceding camp attendance. \$10 late fee for late payment.
- There will be a \$25 fee for each scheduling change and a returned check fee of \$35. Late payment fee \$10.
- A 3.65% convenience fee applies to all credit/debit card payments.
- There will be no refunds or make-up days for missed days.

I hereby agree to allow my child's photograph to be used in all promotional materials and/or the camp website. My signature below certifies that I have read and understand the above-listed Summer Camp at GPS registration policies.

Parent/Guardian (printed name) _____

Parent/Guardian (signature) _____ Date _____



Summer Camp at GPS 2023

Camper Information Form

Please PRINT clearly all information below with current contact names and numbers

Camper Name: _____

Gender: M / F Grade in fall 2023: _____ Date of Birth: _____

Siblings attending Summer Camp at GPS _____, _____, _____

Parent/Guardian 1: _____ Work Phone: _____ Cell: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____ e-mail address: _____

Parent/Guardian 2: _____ Work Phone: _____ Cell: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____ e-mail address: _____

Names of anyone authorized to pick up your child and/or emergency contacts:

Name: _____ Phone: _____ OK to Pick Up Emergency Contact

Name: _____ Phone: _____ OK to Pick Up Emergency Contact

Name: _____ Phone: _____ OK to Pick Up Emergency Contact

The following individuals ARE NOT authorized to pick up your child from camp: _____

Doctor's Name: _____ Office Phone: _____

Please list any additional medical information here. Include allergies, medication taken regularly (at home or at camp), special physical problems, etc.

I, the undersigned, parent/guardian of _____, minor(s), give permission to Summer Camp at Granada Preparatory School (GPS) to obtain emergency medical attention for my child in the event that GPS is unable to contact me. Additionally, I agree that GPS and its designated leaders are not legally liable for any claim from any consent given in good faith in connection with such diagnosis or advised treatment. This authorization is given in conjunction with any authorized program event. My child has my approval to participate in Summer Camp at GPS activities.

I further agree and understand that:

1. If medication is to be given, GPS and its administrators, directors, employees, and agents are not legally or financially liable for administering or for the results of administering medication.
2. If medication is to be given, parent/guardian must make arrangements in writing with the Camp Director and provide necessary written authorization. All medication must be in original packaging (e.g., no plastic bags with loose pills).
3. Minors are not to have medication of any kind on their person or in their belongings at any time.
4. In case of accident, GPS assumes no financial responsibility beyond secondary insurance coverage.

I assume all risks and hazards incidental to the conduct of GPS and transportation to and from the Camp and Camp activities. I further release, absolve, indemnify and hold harmless GPS, its board, directors, officers, employees and agents for any injuries my child may sustain as a participant in the Camp. I further expressly agree that this waiver is intended to be as broad and inclusive as is permitted by the State of California, and if any portion is held invalid, it is agreed that the balance shall continue in full legal force and effect.

I hereby agree to allow my child's photograph to be used in all promotional materials and/or the Camp website.

Signature of Parent/Guardian

Date