



SUNSHINE SPRING CAMP

CREATE YOUR OWN DAY!

[THIS SHEET MUST BE TURNED IN WITH FULL PAYMENT. PLEASE RETURN IN PAYMENT ENVELOPE]
 (Please check which trips or activities you are paying for. Karate and Dance are on site)
 (DEADLINE DATE TO REGISTER IS 3/19/2010 before late fees apply) (PLEASE SEE ADDITIONAL COSTS)

DATES / COST

OPTIONAL TRIPS / ACTIVITIES

March 29th
 (Cost \$15.00 per child)
 (Cost after 3/19 \$25.00)

1. Bowling (\$15.00) (Grant parents, trip included)

2. Karate (\$10.00) 3. Dance (\$10.00)

March 30th
 (Cost \$15.00 per child)
 (Cost after 3/19 \$25.00)

1. Gameworks (\$25.00) (grant not included)

2. Karate (\$10.00) 3. Dance (\$10.00)

March 31st
 (Cost \$15.00 per child)
 (Cost after 3/19 \$25.00)

1. DJ Party at Regional Park (\$10.00)
 (Grant parents trip included)

2. Karate (\$10.00) 3. Dance (\$10.00)

April 1st
 (Cost \$15.00 per child)
 (Cost after 3/19 \$25.00)

1. Movies (\$20.00) (grant not included)

2. Karate (\$10.00) 3. Dance (\$10.00)

April 2nd
 (Cost \$15.00 per child)
 (Cost after 3/19 \$25.00)

1. Spring Fling at Regional Park (\$10.00)

(Grant parents, trip included)

(Bounce house, slide, obstacle course, a visit from the Easter Bunny, Easter Egg Hunt, snow cones and lots of fun!)

April 5th
 (Cost \$15.00 per child)
 (Cost after 3/19 \$25.00)

1. Swimming (\$10.00) (grant not included)

Pine Island to Pine island Pool, Driftwood to Driftwood Pool,
 Broward Central to Broward Central Water Park, West Regional to West
 Regional Water Park

Waiver: I, the undersigned, do hereby release and agree to save harmless Sunshine After School Care Inc., Titan Bus Company, agents, or operation facilities, from all claims for loss, injury or damage, to persons And/or property while participating in any chosen Activity, which I, or person claiming through me or on my behalf may at any time have arising out of or connected with the operation of this Activity. I give permission for my child to travel off campus during activity times.

Parent Signature: _____

Date: _____

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SPRING CAMP REGISTRATION FORM

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(Please check which trips or activities you are paying for)

SITE LOCATION FOR SPRING CAMP: Circle One

1. Broward Central Regional Park

2. West Regional Park

3. Pine Island CC

4. Driftwood CC

1 Child's Full Name: _____ **Age:** _____ **Grade:** _____

1 Medical Concerns: _____

2 Child's Full Name: _____ **Age:** _____ **Grade:** _____

2 Medical Concerns: _____

3 Child's Full Name: _____ **Age:** _____ **Grade:** _____

3 Medical Concerns: _____

Guardian # 1

Name: _____

Home #: _____

Cell #: _____

Work #: _____

Guardian # 2

Name: _____

Home #: _____

Cell #: _____

Work #: _____

Persons allowed to pick up:

Name: _____

Contact # _____

Name: _____

Contact # _____

PLEASE NOTE - FIELD TRIPS ARE SUBJECT TO CHANGE

Type of payment: **Cash** **Check** **Credit Card** **Money Order**

Amount paid: \$ _____ **Date paid:** _____