



Return by May 5, 2017
Green Oaks
Registration
Summer Camp
2017

STUDENT			
	(First Name)	(Middle Name)	(Last Name)
	Gender: _____	_____	_____
	Address: _____		
	City/State: _____		Zip Code: _____

PARENT	First Name: _____	Cell Ph: _____
	Last Name: _____	Work Ph: _____
	Address: _____ Zip Code: _____	E-mail: _____
	City/State: _____	

TUITION	Registration Fee: \$30.00 per camper			
		Weekly Tuition	June Supply Fee	July Supply Fee
	Summer Camp:	\$145.00	N/A	N/A
*Field trip costs will be collected separately				

Attendance: Date student will start: _____
I, _____, will be enrolling my child, _____, into 2017 Summer Camp Program. I am securing my child's enrollment by paying the registration fee of \$30.00.

For office use only: Registration Paid: Yes NO N/A _____
Date of Registration: _____ Teacher Assignment: _____

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