

Carden Arbor View School Summer Program 2019 Registration

Student Name _____ Grade in Fall _____

Session 1 (June 24-July 3)

Kindergarten Half Day\$310
 Kindergarten Full Day\$465
 Cougar Paws - **Water Play** (July 26).....\$ 55
 Cougar Paws - **Wheels Day** (August 2)\$ 55
 Period 1 _____ \$155
 2nd Choice _____
 Period 2 _____ \$155
 2nd Choice _____
 Period 3 _____ \$155
 2nd Choice _____
 Extended Care\$ 125
 Discount _____ \$ _____
Total Session 1 \$ _____

Math Intensive

Fridays, July 12-19-26 & August 2-9-16 \$ 360
 Discount _____ \$ _____
Total Math Intensive \$ _____

Session 2 (July 8-July 19)

Kindergarten Half Day\$310
 Kindergarten Full Day\$465
 Cougar Paws - **Water Play** (July 12)\$ 55
 Cougar Paws - **Billions of Bubbles** (July 19)\$ 55
 Period 1 _____ \$155
 2nd Choice _____
 Period 2 _____ \$155
 2nd Choice _____
 Period 3 _____ \$155
 2nd Choice _____
 Cougar Tracks - **Walk Around Town** (July 12) .\$. 85
 Cougar Tracks - **Movie & a Museum** (July 19) ...\$ 85
 Extended Care\$ 125
 Discount _____ \$ _____
Total Session 2 \$ _____

Session 3 (July 22-August 2)

Kindergarten Half Day\$310
 Kindergarten Full Day\$465
 Cougar Paws - **Water Play** (July 26).....\$ 55
 Cougar Paws - **Wheels Day** (August 2)\$ 55
 Period 1 _____ \$155
 2nd Choice _____
 Period 2 _____ \$155
 2nd Choice _____
 Period 3 _____ \$155
 2nd Choice _____
 Cougar Tracks - **Aquarium of Pacific** (July 26).\$. 85
 Cougar Tracks - **Medieval Times Summer Matinee**
 (August 2)\$ 85
 Extended Care\$ 125
 Discount _____ \$ _____
Total Session 3 \$ _____

Session 4 (August 5-August 16)

Kindergarten Half Day\$310
 Kindergarten Full Day\$465
 Cougar Paws - **Ooey Gooey Science** (August 9).\$. 55
 Cougar Paws - **Wheels Day** (August 16)\$ 55
 Period 1 _____ \$155
 2nd Choice _____
 Period 2 _____ \$155
 2nd Choice _____
 Period 3 _____ \$155
 2nd Choice _____
 Cougar Tracks - **Pirates Show** (Aug 9).....\$. 85
 Cougar Tracks - **Movie Pizza Movie** (Aug 16)\$ 85
 Extended Care\$ 125
 Discount _____ \$ _____
Total Session 4 \$ _____



Carden Arbor View School Summer Program 2019 Contact Information

Student Name _____ Date of Birth _____

Address _____

City, Zip _____

Parent/Guardian Information _____

E-Mail Address _____

Home Phone _____ Work Phone _____

Cell Phone _____ Cell Phone _____

Emergency Contact _____ Phone _____

Emergency Contact _____ Phone _____

Medical Allergies _____ Medications _____

Food Allergies _____

Physician Name _____ Phone _____

In the event of an emergency, I authorize Carden Arbor View School to seek appropriate medical treatment. I give permission for the above named child to participate in summer program activities both on and off campus. I have reviewed and agree to the Refund Policy.

Signature _____ Date _____

Student's Current School _____

Grade In Fall _____

***T-Shirt Size (circle one):** Youth S M Adult S M L XL

Paid: CC Check# _____ Cash Date _____ Amount \$ _____