

DROP IN REGISTRATION FORM

Please fill out and submit with your payment. Please make checks to Kids In Motion LLC or choose one of the electronic payment options. Siblings must be on separate forms.

<u>OFFICE USE ONLY</u>	
Payment:	_____
Method:	_____
Date:	_____
Notes:	_____

CAMPER NAME _____ AGE _____ DATE OF BIRTH _____

PARENT NAME(S) _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

CELL PHONE(S) _____ EMAIL ADDRESS(ES) _____

PLEASE LIST THE SCHOOL THAT YOUR CHILD ATTENDS _____

ENTIRE CAMP

WEEK 1 (6/11-6/15)

WEEK 2 (6/18-6/22)

WEEK 3 (6/25-6/29)

WEEK 4 (7/2-7/6)

WEEK 5 (7/09-7/13)

WEEK 6 (7/16-7/20)

	WEEK 1 (6/11-6/15)					WEEK 2 (6/18-6/22)					WEEK 3 (6/25-6/29)					WEEK 4 (7/2-7/6)					WEEK 5 (7/09-7/13)					WEEK 6 (7/16-7/20)				
Day	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F
Date	6/11	6/12	6/13	6/14	6/15	6/18	6/19	6/20	6/21	6/22	6/25	6/26	6/27	6/28	6/29	7/02	7/03	7/04	7/05	7/06	7/09	7/10	7/11	7/12	7/13	7/16	7/17	7/18	7/19	7/20
Price	70	70	70	70	70	70	70	70	70	70	70	70	70	SOLD OUT	70	70	70	No Camp	70	70	70	70	70	70	70	70	70	70	70	70

PLEASE CIRCLE THE INDIVIDUAL CAMP DAYS OR WEEKS THAT YOU ARE REGISTERING FOR ABOVE

If we cannot make immediate contact with you (or your spouse) in the event of an emergency, we should contact the following person to notify them of the situation:

EMERGENCY CONTACT NAME _____ RELATIONSHIP _____ CELL PHONE _____ HOME PHONE _____

PLEASE LIST ANY ALLERGIES OR MEDICAL CONDITIONS YOUR CHILD HAS THAT CAMP STAFF SHOULD BE AWARE OF _____

I, the undersigned, hereby give my authorization for my child to participate in Camp Kids In Motion. I agree to defend, indemnify, and hold harmless Kids In Motion LLC and St. Patrick's Episcopal Church and Day School and each organizations' directors, supervisors, employees, and volunteers from any and all loss, liability, charges and expenses (including attorney's fees) and costs which may arise from my participation in Camp Kids In Motion. As the participant's legal guardian, I hereby consent to emergency treatment of my minor child as a result of accident or injury. I further agree to pay any and all costs incurred as a result of said treatment.

PARENT/LEGAL GUARDIAN SIGNATURE _____ DATE _____

LUNCH ORDER FORM

Please fill out this optional prepaid lunch form. Please fill out separate forms for siblings.

Please add total to payment calculator form.

DATE	PREPAID LUNCH OPTIONS	COST	QUANTITY OF EACH	SUBTOTAL
Mon 6/11	4" Turkey or Ham Subway Sandwich	\$3 each	Turkey: Ham:	
Tues 6/12	Soft Taco, Crunchy Taco, Bean & Cheese Burrito, or Chicken Mini-Quesadilla from Taco Bell	\$2 each	Crunchy: Soft: Burrito: Quesadilla:	
Wed 6/13	Slices of Cheese or Pepperoni Pizza	\$2 each	Cheese: Pepperoni:	
Thu 6/14	Lunch box (4" deli sandwich, chips, & cookie) from Alpine Deli	\$6 each	Turkey: Ham:	
Fri 6/15	Slices of Cheese or Pepperoni Pizza	\$2 each	Cheese: Pepperoni:	
Mon 6/18	4" Turkey or Ham Subway Sandwich	\$3 each	Turkey: Ham:	
Tues 6/19	Soft Taco, Crunchy Taco, Bean & Cheese Burrito, or Chicken Mini-Quesadilla from Taco Bell	\$2 each	Crunchy: Soft: Burrito: Quesadilla:	
Wed 6/20	Slices of Cheese or Pepperoni Pizza	\$2 each	Cheese: Pepperoni:	
Thu 6/21	Lunch box (4" deli sandwich, chips, & cookie) from Alpine Deli	\$6 each	Turkey: Ham:	
Fri 6/22	Slices of Cheese or Pepperoni Pizza	\$2 each	Cheese: Pepperoni:	
Mon 6/25	4" Turkey or Ham Subway Sandwich	\$3 each	Turkey: Ham:	
Tues 6/26	Soft Taco, Crunchy Taco, Bean & Cheese Burrito, or Chicken Mini-Quesadilla from Taco Bell	\$2 each	Crunchy: Soft: Burrito: Quesadilla:	
Wed 6/27	Slices of Cheese or Pepperoni Pizza	\$2 each	Cheese: Pepperoni:	
Thu 6/28	Family Dodger Day Game against the Cubs	NONE	SEND LUNCH OR MONEY	NONE
Fri 6/29	Slices of Cheese or Pepperoni Pizza	\$2 each	Cheese: Pepperoni:	
Mon 7/2	4" Turkey or Ham Subway Sandwich	\$3 each	Turkey: Ham:	
Tues 7/3	Soft Taco, Crunchy Taco, Bean & Cheese Burrito, or Chicken Mini-Quesadilla from Taco Bell	\$2 each	Crunchy: Soft: Burrito: Quesadilla:	
Wed 7/4	NO CAMP TODAY	N/A	NO CAMP TODAY	NONE
Thu 7/5	Lunch box (4" deli sandwich, chips, & cookie) from Alpine Deli	\$6 each	Turkey: Ham:	
Fri 7/6	Slices of Cheese or Pepperoni Pizza	\$2 each	Cheese: Pepperoni:	
Mon 7/9	4" Turkey or Ham Subway Sandwich	\$3 each	Turkey: Ham:	
Tues 7/10	Soft Taco, Crunchy Taco, Bean & Cheese Burrito, or Chicken Mini-Quesadilla from Taco Bell	\$2 each	Crunchy: Soft: Burrito: Quesadilla:	
Wed 7/11	Slices of Cheese or Pepperoni Pizza	\$2 each	Cheese: Pepperoni:	
Thu 7/12	Lunch box (4" deli sandwich, chips, & cookie) from Alpine Deli	\$6 each	Turkey: Ham:	
Fri 7/13	BEACH DAY – There are lunch options available at the beach!	NONE	SEND LUNCH OR MONEY	NONE
Mon 7/16	4" Turkey or Ham Subway Sandwich	\$3 each	Turkey: Ham:	
Tues 7/17	Soft Taco, Crunchy Taco, Bean & Cheese Burrito, or Chicken Mini-Quesadilla from Taco Bell	\$2 each	Crunchy: Soft: Burrito: Quesadilla:	
Wed 7/18	Slices of Cheese or Pepperoni Pizza	\$2 each	Cheese: Pepperoni:	
Thu 7/19	Lunch box (4" deli sandwich, chips, & cookie) from Alpine Deli	\$6 each	Turkey: Ham:	
Fri 7/20	Slices of Cheese or Pepperoni Pizza	FREE!	Cheese: Pepperoni:	FREE!
GRAND TOTAL				

Camper Name: _____

DAYCARE FORM

Please fill out this optional prepaid daycare form. Please fill out additional forms for siblings.
Daycare will be run by Mrs. Harrison or Ms. DiCicco. **Please add total to payment calculator form.**

The Daycare cost is \$6 per hour (\$1.50 per 15 min)

**DAILY DAYCARE DEAL* - \$20 (Per Day Per Camper) *Must sign up ahead of time.*

Date	Expected AM Arrival Time	Expected PM Pick Up Time	Total Hours	Daily Total (Hours X \$6.00)	Sub-Total
Mon 6/11					
Tues 6/12					
Wed 6/13					
Thu 6/14					
Fri 6/15					
Mon 6/18					
Tues 6/19					
Wed 6/20					
Thu 6/21					
Fri 6/22					
Mon 6/25					
Tues 6/26					
Wed 6/27					
Thu 6/28					
Fri 6/29					
Mon 7/2					
Tues 7/3					
Wed 7/4	NO CAMP	NO CAMP	NO CAMP	NO CAMP	NO CAMP
Thu 7/5					
Fri 7/6					
Mon 7/09					
Tues 7/10					
Wed 7/11					
Thu 7/12					
Fri 7/13					
Mon 7/16					
Tues 7/17					
Wed 7/18					
Thu 7/19					
Fri 7/20					
				GRAND TOTAL	\$

CAMPER NAME: _____

CREDIT CARD PAYMENT AUTHORIZATION FORM



(Please leave this page blank if you are using another payment option)

Sign and complete this form to authorize Kids In Motion LLC to make a one-time debit to your credit card listed below. By signing this form you give us permission to debit your account for the **GRAND TOTAL** (*indicated on the subsequent Payment Calculator form*) **PLUS 5%**. This payment will be processed on or after the date below. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

VISA

MASTERCARD

AMERICAN EXPRESS

DISCOVER

CHECK CARD TYPE ABOVE

NAME ON CARD

CARD NUMBER

CARD EXPIRATION DATE

SECURITY CODE/CVV (3 DIGIT CODE ON BACK OR 4 DIGIT CODE ON FRONT OF AMEX)

BILLING ADDRESS (ONLY IF DIFFERENT THAN ON REGISTRATION FORM)

BILLING CITY

BILLING STATE

BILLING ZIP CODE

CELL PHONE NUMBER

EMAIL ADDRESS

By signing below I, _____, authorize Kids In Motion LLC to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for child-care services (at Camp Kids In Motion), for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated above.

PRINT NAME HERE

SIGNATURE

DATE

PAYMENT CALCULATOR

Please add the totals from the registration form, lunch order form, & daycare form on this page.

The pre-registration period runs until June 1st.

Please make checks payable to Kids In Motion LLC.

⊕ Indicates an Optional Service. ● Indicates a conditional program based upon your type of enrollment.

	AMOUNT	SUBTOTAL
Tuition Camper 1		
Tuition Camper 2 (Leave blank if this doesn't apply)		
Tuition Camper 3 (Leave blank if this doesn't apply)		
● Loyalty Discount (Leave blank if this doesn't apply)	-	
● Sibling Discount (Leave blank if this doesn't apply)	-	
⊕ Daycare Fees (Leave blank if this doesn't apply)		
⊕ Prepaid Lunches (Leave blank if this doesn't apply)		
⊕ Camp Kids In Motion Shirt \$15 each. Colors: White, Light Blue, Green, Grey, Yellow, Pink, Purple, or Black. Sizes: YXS, YS, YM, YL, YXL, S, M, or L.	[Please list size & color here]	
⊕ Camp Kids In Motion Sunglasses \$10 each		
⊕ Additional Dodger or Beach Guest Spot \$70 each for Dodger Game or \$20 each for Beach Day (Leave blank if this doesn't apply)	[Please indicate the name of the person(s) using Guest Spot(s)]	
● Credit Card Fee (5%) (Leave blank if this doesn't apply)		
GRAND TOTAL		\$

CASH
 CHECK
 CREDIT CARD
 VENMO
 PYPAL

PLEASE CHECK YOUR PAYMENT OPTION ABOVE

We accept VENMO and PYPAL electronic payments. Venmo is preferred. Please send Venmo payments to @COACHBRANDONRUSSELL. Please send Paypal payments to BRINMOTION@GMAIL.COM. Please add a note to the payment mentioning Summer Camp and the name of your child. Please do not forget to fill out and return the registration form and sign the waiver. In order to participate, all students must have a waiver on file.

