



Children's House

SUMMER SEMESTER 2009
(MAY 11 - JULY 31)

<u>DAY CAMP I</u> May 11 - June 5	<u>DAY CAMP II</u> June 8 - July 3	<u>DAY CAMP III</u> July 6 - July 31
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PRE-REGISTRATION FORM

Child's name _____	Nickname _____
Gender _____ Birthdate _____	Present age _____ years _____ months
Parent(s)/guardian name with whom child lives _____	
Mailing address _____	City _____ Zip _____

Father's Name _____ A# _____
 Telephone _____ Home _____ Work _____
 Relationship to USU (please all that apply)
 Student Classified Hourly Faculty Professional Alumni Community

Mother's Name _____ A# _____
 Telephone _____ Home _____ Work _____
 Relationship to USU (please all that apply)
 Student Classified Hourly Faculty Professional Alumni Community

I prefer the following SUMMER DAY CAMP session(s) checked () below:

SUMMER DAY CAMP SESSIONS		
<u>DAY CAMP I</u> ____ May 11-June 5	<u>DAY CAMP II</u> ____ June 8 -July 3	<u>DAY CAMP III</u> ____ July 6 - July 31

I prefer the following enrollment session options(s) marked below. Please write in DC I, DC II, or DC III if enrollment session option differs with each Day Camp session.

ENROLLMENT SESSION OPTIONS		
<u>8:00 AM - 5:00 PM</u> ____ FULL-DAY (MTWThF) ____ FULL-DAY (MWF) ____ FULL-DAY (TTh)	<u>8:00 AM - 12:00 NOON</u> ____ HALF-DAY AM (MTWThF) ____ HALF-DAY AM (MWF) ____ HALF-DAY AM (TTh)	<u>1:00 PM - 5:00 PM</u> ____ HALF-DAY PM (MTWThF) ____ HALF-DAY PM (MWF) ____ HALF-DAY PM (TTh)

I prefer the following extended care option(s) marked below. Please write in DC I, DC II, or DC III if extended care option differs with each Day Camp session.

EXTENDED CARE OPTIONS* 12 NOON - 1:00 PM		
____ MTWThF	____ MWF	____ TTh
*available to children enrolled in half-day session options based on need, space and staff availability		

_____ I have attached the required non-refundable registration fee of \$_____ (\$10 per child) for each SUMMER DAY CAMP session I wish to enroll my child(ren).

(Please make check or money order payable to: USU Children's House.)

Parent Signature _____ Date _____