



# St. John's Episcopal School

## Camp Cardinal Contract Summer 2010

Student Name(s): \_\_\_\_\_ Age: \_\_\_\_\_ Grade in September: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_ Grade in September: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mother: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Contact Person and Phone: \_\_\_\_\_

Allergies/Special Concerns: \_\_\_\_\_

Medications: \_\_\_\_\_

Students in Jump Start Kindergarten through Fifth Grade attending St. John's Episcopal Summer School Programs may participate in Camp Cardinal. The prepaid, weekly fee of \$225 per student (*includes lunch*) is charged for those attending any portion of the day/week. **The Camp Cardinal contract is separate from the Summer School and Jumpstart Kindergarten contracts**, with hours of 7:45 to 8:45 a.m. and 12:00 to 5:30 p.m. Students must be enrolled in all three hours of Summer School, as Camp is not provided between 9:00 a.m. and 12:00 noon. **Students must be picked up promptly by 5:30 p.m., or there will be a \$5 per minute charge, with NO exceptions.**

Please check the weeks that you will be using the Extended Care Program, and return this contract with **full payment**, by May 24, 2010. The Extended Care fees are non-refundable; sorry, there are NO exceptions. By signing this contract, you agree to all conditions listed herein. St. John's reserves the right to cancel this contract at any time, with or without cause.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

Parent, fill out this section completely and attach check for the total amount.

July 5-9 \_\_\_\_\_ \$225 x # of students \_\_\_\_\_ = \$ \_\_\_\_\_

July 12-16 \_\_\_\_\_ \$225 x # of students \_\_\_\_\_ = \$ \_\_\_\_\_

July 19-23 \_\_\_\_\_ \$225 x # of students \_\_\_\_\_ = \$ \_\_\_\_\_

July 26-30 \_\_\_\_\_ \$225 x # of students \_\_\_\_\_ = \$ \_\_\_\_\_

Add **\$50.00** late fee for contracts **after May 24** \$ \_\_\_\_\_

**Total Amount Due: \$ \_\_\_\_\_**

For Office Use Only:

Date Received: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Check #: \_\_\_\_\_

Received By: \_\_\_\_\_

## Camp Cardinal Lunch Menu

**Student Name:** \_\_\_\_\_

Due May 24, 2010

**Return this form to Melanie Itakura for processing**

Students can not make changes; Parents must call 1 week in advance of any changes.

Lunches include: Bottled water and Seasonal Fresh Fruit or Vegetables

\*Check off your selection for each day. Lunches will be the same all 4 weeks.

### \*\*\*\*\*MONDAY\*\*\*\*\*

- 1. Chicken Tenders with Hash browns
- 2. Macaroni and Cheese

### \*\*\*\*\*TUESDAY\*\*\*\*\*

- 1. Hamburger/ add cheese, chips
- 2. Turkey Hotdog, chips

### \*\*\*\*\*WEDNESDAY\*\*\*\*\*

- 1. Grilled Cheese
- 2. Turkey Sandwich

### \*\*\*\*\*THURSDAY\*\*\*\*\*

- 1. Bean 'n Cheese or Beef 'n Bean Burrito---Circle one
- 2. Cheese Quesadilla / add chicken

### \*\*\*\*\*FRIDAY\*\*\*\*\*

- 1. French Bread Pepperoni Pizza / Cheese only
- 2. Spaghetti with a meat sauce / without sauce /butter only