

# Oak and Lily Academy 2024

## School Age Summer Camp

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Grade Completed: \_\_\_\_\_

**\*\*\*\*School Age Summer Camp is only for elementary students who have completed grades Kindergarten-3<sup>rd</sup> Grade\*\*\*\***

My child will attend all nine (9) weeks of summer camp during the 2024 season  
(If your child is not attending all nine (9) weeks, please check the weeks your child will attend)  
Changes to the weeks chosen cannot be made after May 31, 2024.

Aloha Summer	Mission Impossible	America the Beautiful
Week One	Week Two	**Week Three
June 17-21 (closed 6/19)	June 24-28	July 1-5 (closed 7/4 & 7/5)
Animal Adventure	Ooey Gooey Science	Shark Week
Week Four	Week Five	Week Six
July 8-12	July 15-19	July 22-26
The Magic of Storytelling	2024 Summer Olympics	Spirit Week
Week Seven	Week Eight	Week Nine
July 29-August 2	August 5-9	August 12-16

### Summer Camp Rates

Registration Fee: \$75.00 (due at time of registration, non-refundable)

Activity Fee: Elementary - \$125.00

Weekly Tuition: (please check one)

5 Full Days- \$220 (8:00 AM-4:00 PM) ----\*\*Week 3 is \$175 for the week

5 Extended Days W/ Before AND After- \$250 (6:30 AM-6:00 PM) ----\*\*Week 3 is \$200 for the week

By signing this form, I agree to pay the weekly tuition rate the Friday before the week of attendance indicated above via Tuition Express.

Parent/Guardian Signature: \_\_\_\_\_

**Oak and Lily Academy**  
**Summer Camp School Age Student Profile**

Name of Child: \_\_\_\_\_ Nickname: \_\_\_\_\_

Age by Sept. 30th: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ (circle) Male Female

Grade Completed: \_\_\_\_\_ Shirt Size (circle) YXS YS YM YL YXL

Address: \_\_\_\_\_  
\_\_\_\_\_

Father's Name \_\_\_\_\_ Cell No. \_\_\_\_\_

Email \_\_\_\_\_ Cell Phone Carrier \_\_\_\_\_

Employer \_\_\_\_\_ Work No. \_\_\_\_\_

Mother's Name \_\_\_\_\_ Cell No. \_\_\_\_\_

Email \_\_\_\_\_ Cell Phone Carrier \_\_\_\_\_

Employer \_\_\_\_\_ Work No. \_\_\_\_\_

Child Lives With:  
\_\_\_\_\_

Other Children in family (names & ages):  
\_\_\_\_\_  
\_\_\_\_\_

Previous School or Centers:  
\_\_\_\_\_

Allergies and/or medical conditions:  
\_\_\_\_\_

Emergency Contacts and Authorized Pick Up Persons (other than parents):

Name

Phone Number

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Persons NOT allowed to pick up child: (court or legal documents stating so are required)

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With my signature, I certify that all the information provided on this form is true and updated to the best of my knowledge and that I am the true legal guardian of the above. I agree not to hold Oak & Lily Academy or any of its representatives or employees at fault should my child be injured in any manner whatsoever. I give Oak & Lily Academy permission to take whatever action required in an emergency.

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Parent/Custodian Signature

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Date

**PERMISSION TO USE IMAGE**

Oak & Lily Academy uses student pictures on our Facebook page and our website. The images are used to show parents, friends and family the activities we are participating in daily. At no time is a child singled out or identified by name. The images are not used for anything outside of the above mentioned pages.

Please sign below acknowledging your notification of the use of image for the Facebook page and the Oak & Lily Academy website.

Student Name \_\_\_\_\_

Parent Signature \_\_\_\_\_

**PERMISSION TO TEXT**

I/We hereby give permission to Oak & Lily Academy to send pertinent text message (Weather, Emergency Updates) concerning the student listed below.

Student Name \_\_\_\_\_

I acknowledge that I have read and agree with the Parent Handbook, the Oak & Lily Sick Policy, and Oak & Lily Discipline Policy (age group specific). These documents can be found on the Oak & Lily Academy website at [www.oakandlilyacademy.org](http://www.oakandlilyacademy.org) found under Parent Resources.

I understand that to enroll my child at Oak & Lily Academy: The registration packet, a completed Tuition Express form, a completed School Entrance Health Form including current immunization record signed by a physician, and a copy of the birth certificate or proof of birth must be provided along with the non-refundable Registration Fee and Curriculum Fee are due at the time of registration. Your child's spot will not be secured until we have received these items.

\_\_\_\_\_

Parent/Custodian Signature

\_\_\_\_\_

Date

*Donna Davis*

Director Signature

# Automated Payment Processing



Safe. Convenient. Easy.

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

## ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT AND CREDIT CARD

I (we) hereby authorize (business name) OAK AND LILY ACADEMY to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

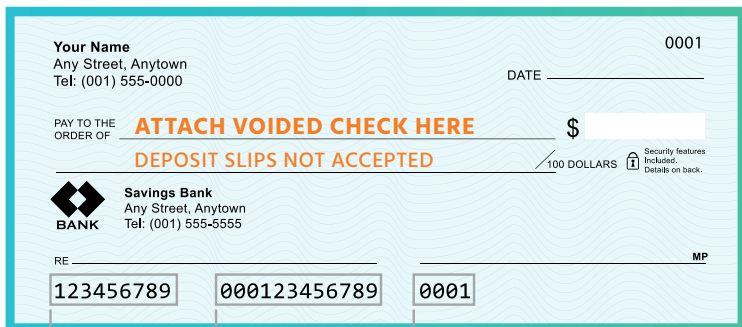
### COMPLETE ONE SECTION ONLY

#### SECTION A (Credit Card)

Cardholder Name	Phone #		
Cardholder Address	City	State	Zip
Account Number	Expiration Date	CVV Code	
Cardholder Signature	Date		

#### SECTION B (Bank Account)

Your Name	Phone #			
Address	City	State	Zip	
Bank or Credit Union Name	Bank or Credit Union Address	City	State	Zip
Routing Transit Number (see sample below)	Account Number (see sample below)	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	
Authorized Signature	Date			



ROUTING NUMBER      ACCOUNT NUMBER      CHECK NUMBER

#### FOR OFFICIAL USE ONLY

_____
<b>Date Received</b>
_____
<b>Employee Signature</b>

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