

# Experience a summer at Luther Memorial School

## 2012 Summer Programs Application

*Please return completed application with 4 signatures and a  
**\$100.00 NON-REFUNDABLE DEPOSIT** to the school office.*

### Application, Part 1 *General Information*

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Sex: M F Birth Date \_\_\_\_\_ Grade in Sept. '12 \_\_\_\_\_

School now attending \_\_\_\_\_

Home Address \_\_\_\_\_

Home phone # \_\_\_\_\_

Child lives with (please circle) mother, father, both mother and father, guardian

Mother's name \_\_\_\_\_ Mother's email \_\_\_\_\_

Mother's home # \_\_\_\_\_ work # \_\_\_\_\_ cell # \_\_\_\_\_

Father's name \_\_\_\_\_ Father's email \_\_\_\_\_

Father's home # \_\_\_\_\_ work # \_\_\_\_\_ cell # \_\_\_\_\_

Authorized pick-up for applicant (other than parents or guardian). Please list names and phone #

1. \_\_\_\_\_

2. \_\_\_\_\_

All students receive a free Summer Programs T-Shirt. Please indicate desired size:

Children's     S     M     L    or    Adult's     S     M     L     XL

I agree to allow my child to be transported by a chartered bus to off-campus facilities or activities that are part of the regularly planned program.

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

### Application, Part 2 *Health Information*

Emergency contact person \_\_\_\_\_

home# \_\_\_\_\_ work# \_\_\_\_\_ cell# \_\_\_\_\_

Physician's name & phone# \_\_\_\_\_

Dentist's name & phone# \_\_\_\_\_

Insurance \_\_\_\_\_ ID# \_\_\_\_\_

List any allergies, physical handicaps, or special conditions of which we should be aware: \_\_\_\_\_

List any activities in which your child should not participate due to health reasons: \_\_\_\_\_

I certify that all information given is correct, and that my child has permission to engage in all scheduled activities except those noted above. If I am notified of illness, arrangements will be made for immediate pick-up of my child. In the event I cannot be reached in a medical emergency, I hereby give permission to the physician or hospital selected by the Summer Programs Director or Principal of Luther Memorial School to treat my child.

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

### Application, Part 3 *Student Conduct*

To insure a safe, positive summer experience for everyone, all camp participants are expected to display appropriate behavior. Children in the summer programs are expected to follow the rules set forth in the Luther Memorial School *Student Handbook*. Copies of the *Student Handbook* are available in the school office or on our website. The Summer Programs Director has authorized a dress code for all summer participants. Copies of this dress code are available in the school office. I authorize Luther Memorial School to contact my child's current school for a recommendation. I understand that my child must adhere to the rules set forth in the Luther Memorial School *Student Handbook*, and that repeated inappropriate behavior or noncompliance with the summer dress code will result in the termination of this contract, and my child will be dismissed from Luther Memorial Summer Programs.

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

## **Application, Part 4 *Registration and Calculation of Tuition***

**Camp/Session Choice (Please check (X) as appropriate):**

## ***Young Explorers—one week camps—Preschool through 1st Grade***

<u>1 week</u> <u>Camp</u> \$125	<u>1 week camp</u> <u>w/Ext. Day</u> \$220	<u>All 9 weeks</u> <u>Camps only</u> \$985	<u>All 9 weeks</u> <u>w/Ext. Day</u> \$1,750
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Hourly morning and afternoon Extended Day is available for camp only children at a nominal fee of \$7.50 per hour or a portion of an hour.

## *Junior Discoverers—one week camps—Rising 2nd—6th Grade*

		<u>Camp only</u>	<u>w/Ext. Day</u>
_____	Week 1—American Girl, that's Me! (June 11—15)	\$160	\$270
_____	Week 1—Sports Spectacular! (June 11—15)	\$160	\$270
_____	Week 2—Cupcakes and Cake Pops! (June 18—22)	\$160	\$270
_____	Week 3—Red Hot Robots (June 25—29)	\$160	\$270
_____	Week 4—Happy Birthday America! (July 2-6) No Class 7/4	\$130	\$240
_____	Week 5—Multiplication Mastery! (July 9—13)	\$160	\$270
_____	Week 6—Creative Writing! (July 16—20)	\$160	\$270
_____	Week 7—Eureka! The Inventor's(July 23—27)	\$160	\$270
_____	Week 8—Basketball Camp (July30—August 3)	\$160	\$270
_____	Week 9—Let's Go Legos! (August 6—10)	\$160	\$270

## *Experience summer in the Arts—one week camps—Rising 5th—9th Grade*

		<u>Camp only</u>	<u>w/Ext. Day</u>
<input type="checkbox"/> Basketball Camp 8:30 a.m.—12:00 p.m. (June 11—15)		\$160	
<input type="checkbox"/> Fun with Fondant 101 12:30 p.m.—4:00 p.m. (June 11—15)		\$160	
<b>Both Camps with Extended Day until 5:45 p.m.</b>			<b>\$335</b>
<input type="checkbox"/> Jump Start Summer Reading (June 18—22)		\$160	
<input type="checkbox"/> Creative Study Skills (June 25—29)		\$160	
<input type="checkbox"/> Mask Making (July 2—4) No Class 7/4		\$160	
<input type="checkbox"/> Basketball Camp 8:30 a.m.—12:00 p.m. (July 9—13)		\$160	
<input type="checkbox"/> Slam Dunk Summer Reading 12:30 p.m.—4:00 p.m. (July 9—13)		\$160	
<b>Both Camps with Extended Day until 5:45 p.m.</b>			<b>\$335</b>
<input type="checkbox"/> Digital Scrapbooking (July 16—20)		\$160	
<input type="checkbox"/> Block It 8:30—12:00 p.m. (July 23—27)		\$160	
<input type="checkbox"/> Drawing & Painting 12:30 p.m.—4:00 p.m. (July 23—27)		\$160	
<b>Both Camps with Extended Day until 5:45 p.m.</b>			<b>\$335</b>

## *Musical Theatre Production Camps*

_____ Pirates! The Musical 8:30 a.m.—12:00 p.m. (June 25—July 13)	\$450
_____ Pirates! The Musical with Extended Day until 5:45 p.m.	\$775
_____ The Pajama Game 8:30 a.m.—3:00 p.m. (July 16—August 10)	\$775
_____ Set Design (July 23—27)	\$130
_____ Set Design (July 30—August 3)	\$130

Total Amount Due for all summer camp experiences \$ \_\_\_\_\_

**ALL APPLICANTS:** \$100.00 non-refundable deposit must be attached to the application and mailed to:  
Luther Memorial School  
Attention Director of Summer Programs  
1301 Robin Hood Road  
Richmond, Va. 23227

<u><b>Tuition Payment Dates</b></u>	<u><b>Tuition Due</b></u>
Weeks of: June 11, June 18, June 25, July 2, July 9	Monday, June 4
Weeks of: July 16, July 23, July 30, August 6	Monday, June 25

**PLEASE READ THE FOLLOWING AND SIGN ACKNOWLEDGING YOU HAVE READ ALL NECESSARY INFORMATION AND UNDERSTAND THE OBLIGATIONS:**

I agree to the terms described on page 14 of this brochure regarding financial obligations and agree to be responsible for all charges and fees for my child. I realize that all registration changes must be requested in writing and sent to the Summer Programs Director no later than **Monday, May 14, 2012**. If I submit a registration change after this date, I understand that the complete tuition for which I originally registered my child is due in full. I also understand that **if there is insufficient enrollment Luther Memorial reserves the right to cancel a class no later than two weeks before it is scheduled to begin**. If a cancellation does occur, parents will be notified and a complete refund of tuition will be given.

I give permission for photographs of my child to be used on the Luther Memorial School website or in publications. I understand my child's name will not appear with the photo.

Yes  No

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