

READY ACADEMY'S
Noah's Ark "SHINE" Summer Camp

Registration Form
 June 22, 2026 – July 31, 2026

(PLEASE PRINT)

NAME OF CAMPER: _____
 (Last) (First) (Middle)

AGE: ____ BIRTH DATE: _____ GRADE CHILD COMPLETED: PK3/PK4/K5

PARENT/GUARDIAN'S NAME: _____

ADDRESS: _____

PHONE NUMBER: HOME _____

CELL _____

WORK _____

E-MAIL ADDRESS: _____

Campers T-shirt Size: YXS YS YM YL YXL AS AM AL

CAMP WEEK	YES	NO	MAYBE	CAMP WEEK	YES	NO	MAYBE
June 22-26	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	July 20-July 24	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
June 29-July 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	July 27-31	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
July 6-10	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
July 13-17	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				

TIMES & TUITION

Non-Refundable Registration Fee-\$85.00 per child - (Paid at time of registration)
 *(Fee Includes Camp T-Shirt for all Campers)

Weekly Camp Fee- \$175.00 per week/per child
 (10% discount for additional siblings attending Noah's Ark Camp)
(Must be paid in full each Monday of the week attending Camp) *Tuition includes a daily lunch and afternoon snack

Camp Hours: Monday-Friday 7:00 a.m. - 5:00 p.m.

RULES & REGULATIONS

ALL Campers must be fully potty-trained. No exceptions!!

- Campers are to arrive no earlier than 7:00 am and be picked up no later than 5:00pm
- ALL Campers must eat Breakfast at home before arriving to Camp each day. Campers will be provided a bag lunch and afternoon snack daily.
- Late Pick-Ups will be charged \$1 per minute for every minute that you are late after 5:00pm

Parent/Guardian understands that the Camp Director reserves the right to request the withdrawal of any child who is unable to adjust to the program after a reasonable period of time.

Parent/Guardian Signature _____ Date _____

OFFICE USE ONLY

PAYMENT AMOUNT: \$ _____ APPLIED TOWARDS: REG. FEE WEEKLY CAMP FEE

TYPE OF PAYMENT: CASH CHECK CREDIT CARD MONEY ORDER

ADMIN/STAFF RECEIVING THIS FORM: _____ DATE _____