CHILDRENS NAMES:

ATTENDING CAMP:

# MONDAY TUESDAY

JULY 2022 SUMMER CAMP (JEFFCO)

# WEDNESDAY THURSDAY FRIDAY

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **WEEK OF: 7/4** | **July 5** |  | **JULY 6** | **JULY 7 JULY 8** |
|  | **CLOSED** |  |  |  |
| **CARE NEEDED:** |  |  | **FULL:**  |  | **FULL:**  | **FULL:**  **FULL:**  |
| **WEEK OF: 7/11** | **JULY 11 JULY 12** |  | **JULY 13** | **JULY 14 JULY 15** |
| **CARE NEEDED:** | **FULL:**  **FULL:**  |  | **FULL:**  | **FULL:**  **FULL:**  |
| **WEEK OF: 7/18** | **JULY 18 JULY 19** |  | **JULY 20** | **JULY 21 JULY 22** |
| **CARE NEEDED: FULL:**  **FULL:**  |  | **FULL:**  | **FULL:**  **FULL:**  |
| **WEEK OF: 7/25** | **JULY 25 JULY 26** |  | **JULY 27** | **JULY 28 JULY 29** |
| **CARE NEEDED: FULL:**  **FULL:**  |  | **FULL:**  | **FULL:**  **FULL:**  |
| **STEPS FOR CARE CALCULATION:**1. **Mark 1 next to days you will need care. Daily rate covers entire full day session 630a-600p and cannot be prorated.**
2. **Total the Number of Days signing up for. MINIMUM OF 2 days/Wk REQUIRED Payment must accompany calendar to reserve spot.**
3. **Limited space available. Payment is due AT LEAST by the Wednesday prior to the upcoming week, but it is encouraged earlier in order to increase possibility of spot. Calendars are also required for CCAP families to reserve their space.**
4. **For Safety and tracking purposes, please let Director know if care needs change after calendar submittal.**
 |
| **DUES CALCULATION: Number of IN HOUSE days:**  **Number of FT days:**  | **X** | **X**$ 42.00 ***/*day=**$ 52.00 **=** | $ **SUBTOTAL:** $ $ X Number of Children=**TOTAL DUE:** $  |

\*\*Spots reserved on first paid/scheduled basis.

\*\* No spot is guaranteed until paid/confirmed.

\*$10/day/child DROP-IN fee charged if not scheduled/paid in advance\*