



Weekly Reservation Form

Please select the weeks your child will be attending.
One form is required for each participant.

- Week 1: June 20 to June 24
 Week 2: June 27 to July 01
 Week 3: July 04 to July 08
 Week 4: July 11 to July 15
 Week 5: July 18 to July 22
 Week 6: July 25 to July 29
 Week 7: August 01 to August 05
 Week 8: August 08 to August 12
 Week 9: August 15 to August 19
 Week 10: August 22 to August 26

I, _____(Guardian), would like to secure the weeks listed above for _____ (Participant). I understand that my weeks will not be reserved until the registration fee for each child is paid in full. I understand I cannot cancel or switch weeks for any reason and I agree to pay for the weeks reserved regardless of my child's attendance. I also understand that no refunds are available for any reason.

Signature _____ Date: _____

Weeks reserved _____ Amount Paid _____ Method _____