

Winter Wonderland Half-Day Conference Camps Registration Form Recker Campus

Family's Last Name: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Choose the Days Your Child(ren) Will Attend:

- Wednesday, January 9th, 2019 – 11:40 to 4:00 PM (Cost: \$40, 10% discount for two or more children)
- Thursday, January 10th, 2019 – 11:40 to 4:00 PM (Cost: \$40, 10% discount for two or more children)
- Friday, January 11th, 2019 - 11:45 to 4:00 PM (Cost: \$40, 10% discount for two or more children)

Parent Contact Information:

Parent Name: _____ Emergency Phone Number: _____

Parent Name: _____ Emergency Phone Number: _____

Cost:

# of Children Attending: _____ x \$40.00 x _____ # of days	Subtotal: _____
10% discount for two or more children (not employees)	Subtract 10%: _____
Other _____	Other: _____
	TOTAL: _____

Payment:

Credit Card Order: _____ Exp. Date: _____ CVC: _____

Cash: _____ Check # Order: _____

Make checks payable to San Tan Charter School, Write Recker Conference Camp in the memo.

