

Pacific Camps and Family Resources

Site _____

Original Start Date ___/___/___

2018-2019 Oregon Registration Form

Today's Date ___/___/___

How did you learn of Pacific Camps? Friend___ Banner___ Promotional Event___ Flyer___ Other_____

Child's Legal Name: _____ Birth Date: ___/___/___ Sex (Circle) M F

Please choose one option below:

_____ Pacific Camps has my permission to access my child's immunization records online.

_____ Please do not access my child's immunization records online. I will provide the records with this application.

Allergies: _____ Special Conditions: _____

Please apply parent provided **sunscreen** on my child ___ Yes ___ No Child's T-shirt size _____

Name of School: _____ Grade entering Sept. 2018: _____ Teacher's name _____

Home Address: _____ City: _____ Zip: _____ Phone: _____

All adults 18 and older sharing the home with the camper: _____

Father's/Guardian's Legal Name: _____ Home Phone: _____

Father's Address: _____ City: _____ Zip Code: _____

Father's Place of Employment: _____ Work Phone: _____

Email Address: _____ Cell Phone: _____

Father's Driver's License No.: _____ Exp. Date: _____ SSN: _____

Mother's/Guardian's Legal Name: _____ Home Phone: _____

Mother's Address: _____ City: _____ Zip Code: _____

Mother's Place of Employment: _____ Work Phone: _____

Email Address: _____ Cell Phone: _____

Mother's Driver's License No.: _____ Exp. Date: _____ SSN: _____

Emergency Medical Consent

I hereby consent to Pacific Camp Family Resource, Inc., to obtain all emergency medical or dental care prescribed by a Licensed Physician, Osteopath, or Dentist for my child. This care may be given under whatever conditions are necessary to preserve the life, limb, or wellbeing of my child.

Parent/Guardian Signature: _____ Date: _____

Health Insurance Information

Insurance Company: _____ Plan: _____ Group #: _____

Doctor's Name: _____ Phone: _____ Dentist's Name: _____ Phone: _____

If no dentist is entered above, in the case of a dental emergency your child will be treated at St. Helens Dental (503) 397-3326 or Gateway Dental (503) 252-0048.

Parent/Guardian Signature: _____ Date: _____

Emergency Contact (If Unable to Reach Parents):

Name: _____ Relationship to Camper: _____ Phone: _____

Persons Other Than Parents Who Are 16 Years of Age or Older and Authorized To Pick Up Your Child:

1. Name: _____ Phone: _____ Cell: _____

2. Name: _____ Phone: _____ Cell: _____

Persons Not Authorized to Pick Up Camper: (Note: Court Documentation Is Necessary If This Is A Parent)

1. _____ 2. _____ E1

Parent Handbook

I have read, understand, and agree to follow Camp policies, procedures, and enrollment conditions. I further understand and agree:

1. To allow my child's image to be used in any and all promotional photographs, videos, or websites.
2. Not to hold Pacific Camps responsible for any articles of clothing, personal belongings, or personal athletic equipment that is lost or damaged by theft, fire, natural disaster, or other occurrences.
3. Pacific Camps provides no accident medical protection.
4. By signing my child into the daily program, I am giving Pacific Camps permission to transport my child off Camp property and my child will participate in field trips.
5. By signing my child into the daily program, I am giving Pacific Camps permission to allow my child to participate in swimming, wading or other water activities on or off camp premises.
6. All children will be enrolled on a 90 day trial basis to make sure that Pacific Camps can meet the individual needs of the child. Pacific Camps reserves the right to terminate services at any time.
7. If a child has an IEP or 504 education plan, parent must submit most current copy with registration forms prior to attending.
8. Pacific Camps children are served without regard to race, color, National or ethnic origin or in any other category protected by law. Pacific Camps reserves the right to make decisions regarding camper participation due to physical and/or mental limitations or disabilities. Children with special needs may be enrolled upon mutual agreement between the parents and the Director. Reasonable accommodations will be made for individuals with disabilities. Modifications to policies or procedures can be made if the modifications do not fundamentally alter the services the Camp provides or adversely affect the operation of the program.
9. Arbitration- By signing below, I understand that any dispute involving Pacific Camps and myself or my child shall be resolved by way of arbitration through the rules and regulations of the American Arbitration Association. Each party shall bear its own costs and attorney fees in connection with any such action, to the extent allowed by law.
10. **By my signature below, I am responsible for all financial obligations incurred to Pacific Camps for this child.**
11. As the Parent or Authorized Representative, I hereby give consent to Pacific Camp Family Resource, Inc. to obtain all emergency medical or dental care prescribed by a duly Licensed Physician (M.D.), Osteopath (D.O.) or Dentist (D.D.S.) for my child. This care may be given under whatever conditions are necessary to preserve the life, limb, or well being of my child.
12. There are no refunds or credits given. (For example, but not limited to: If your child is expelled/suspended for disruption or other bad behavior, there is no refund or credit provided by Pacific Camps.)
13. **Please Note:** Pacific Camps is open from 7:00 AM to 6:00 PM. Our non-school day activity programs run from 9:00 AM to 4:00 PM. **Please drop off your child before 9:00 AM and pick up your child after 4:00 PM in order to ensure that your child does not miss that day's event.** There is no alternate care available.

Parent/Guardian Signature: _____ Date of Admission: _____

Child's Legal Name: _____

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POLICIES & PROCEDURES OF PACIFIC CAMPS AND FAMILY RESOURCES

Throughout the following information, "Parent" is defined as any person living with a child who has responsibility for the care and welfare of the child.

GENERAL INFORMATION:

- The parent signing the child's registration form is considered the **financially responsible party for that Child**. If both parents wish to be considered the responsible party both parents must sign the registration form.
- Pacific Camps **staff are trained annually** and are required to have training in first aid and CPR, child abuse detection, self-esteem, communication and discipline. Employees are also screened, fingerprinted, and approved by the state's employment background check guidelines prior to employment as required by law. Our school bus drivers are certified through the DMV and are fingerprinted through the DOJ.
- **"Parent Information"** is located at the front desk area. Important notices, menus, schedule changes and upcoming events will be posted in this area. It is your responsibility to stay updated. **Check Information Board for Notices Daily**.
- It is a requirement that **every child be signed in and out using your initials on the log sheet** at the front desk.
- Pacific Camps serves Preschool through Eighth Grade children from the hours of 7:00 AM to 6:00 PM, Monday through Friday and observes all Federal Holidays unless otherwise noted.
- Pacific Camps is a **Christian Ministry** that seeks to spread the gospel of Jesus Christ. Chapel times and teaching of Biblical truths are part of our weekly programming.
- The staff to child ratio meets all Oregon State Licensing Requirements for each of the programs it provides.
- Pacific Camps **prohibits the use of tobacco, alcohol or non-prescription drugs** on Pacific Camps' premises. Pacific Camps reserve the right not to release children to those with alcohol on their breath or under the influence of drugs or suspicion thereof.
- **Please label all of your children's personal belongings** with their names.
- All children must **wear close-toed shoes** while in attendance.
- Children are required to wear **Camp T-Shirts** every day school is not in session. Camp shirts must be seen. If a child does not have a Camp T-shirt, one will be provided for him/her and a fee of \$12 will be charged to his/her account. (No altered shirts, half shirts, cut sleeves, etc.)
- Pacific Camps generally schedules **"G" or "PG" rated movies** for our field trips and/or onsite events, however, if a **"PG 13"** movie of appropriate matter is available, it may be included.
- Pacific Camps provides **2 Snack** times per day (am and pm). These are provided by Pacific Camps. There is also a snack shack that has snacks and treats available for purchase. You may prepay for your child at the front desk. Children may also bring their own snacks from home and cannot be shared with other children. Desserts provided by parents must be store bought.
- **Parents are required to provide a lunch for their children each day**. Lunch must be present with your child at the time of sign in. A \$6 charge will be added to your account if Pacific Camps needs to provide a lunch for your child.
- Pacific Camps will not be responsible for storing, microwaving, refrigerating or freezing any items.
- Pacific Camps' phones may be used by children in **emergency** situations only. Children are not allowed to use cell phones unless pre-approved by a Director. Pacific Camps cannot be held responsible for lost or stolen cell phones.
- **Pacific Camps provides no accident medical protection.**
- No electronic devices are allowed at Pacific Camps unless authorized for specific Electronics Days.

DISASTER PLANS: In the case of an emergency or disaster, the following procedures will be implemented:

- All children will remain with Pacific Camps staff on the premises or at the designated emergency relocation site, as listed on our Emergency Disaster Plan, for up to 72 hours unless an injury requires release to an emergency medical facility.
- Please do not phone Pacific Camps. Emergency Cellular Phone numbers are: **Dawn 360-721-6791**

REGISTRATION AND TUITION:

- A **Registration Fee** and **Weekly Tuition** is required for your child to attend any Pacific Camps program.
- **Weekly tuition** is due and payable in advance by Friday evening for the next week your child is attending. A late fee of \$18 will be charged if not paid by Friday evening and services may be terminated if delinquency is consistent. If delinquent over 30 days, Pacific Camps will begin a collection process on accounts as deemed necessary. **Billing statements are not sent out unless there is a balance owed.**
- **There are no refunds, rollovers or credits given.**
- Pacific Camps accepts cash, checks, money orders, Master Card, Visa, Amex, Discover and other subsidized methods of payment.

- **Checks returned** from the bank will be subject to a \$30 service charge. If three checks are returned you will be expected to pay with cashiers check, money order, cash or credit card for at least 6 months.
- **Camp closes** promptly at 6pm and children picked up after close will be assessed a late pick up fee of: \$15 for the first 15 minutes (6pm to 6:15pm) and \$1 for each minute thereafter. (This is per child.) Three or more late pick-ups will result in a doubling of late fees. (This is per child.) Services may be terminated if late pick up occurs consistently.
- **Copies of enrollment forms and sign in log** sheets will only be released upon written request by the enrolling parent or court order. A minimum \$25 fee will be charged per quarter of forms requested and may take up to 3 weeks to be processed.
- Pacific Camps will issue **1 account/financial statement** per household per year upon written request. Additional copies can be made available for a fee of \$10. A tax statement will be given upon request only if your account is current.
- Pacific Camps reserves the right to **change our policies and/or procedures** at any time after a 30 day written notification.
- Pacific Camps requires a two (2) week written notification when terminating services.

HEALTH:

- All Pacific Camp staff and volunteers are **mandated reporters** and are required by law to report any suspected child abuse (physical, sexual, verbal or emotional) to Child Protective Services.
- If a child shows **signs of illness** while at Pacific Camps, he/she may not be admitted or may be sent home. If sent home, parent or authorized person will be required to pick up the child **within one hour**. Please seek a physician's help when necessary. Children with fevers and other contagious illnesses must be excluded from Pacific Camps for at least **24 hours** after the temperature returns to normal. Any child diagnosed with a streptococcal infection must be excluded for **48 hours** after the initial dose of physician prescribed medication.
- **We must** be notified if your child has a **communicable disease** (lice, chickenpox, fifth disease etc.), as it is our responsibility to notify other families of the risk and the Health Department/ Community Care Licensing. Pacific Camps has a no Nit policy as it pertains to Lice.
- If a child is involved in a minor accident while at Pacific Camps a **“Parent Information Notification”** will be written and given to parent. If a physician’s care is needed, parents will be contacted immediately and emergency procedures will be followed. A Doctor’s note must be submitted to the Director for review before a child may return to Pacific Camps after injury or illness.
- Pacific Camps will **administer medication** to children only when a parent has completed a medication card. I/We hold Pacific Camps and Family Resources harmless of any damages or responsibility due to insufficient storage or refrigeration of medications.
- **Each medication bottle must have a current prescription label with the child's name, the dosage, and the physician's name** on it. Children may not bring self-administered medications that have not been cleared through the Director. This includes Tylenol and Ibuprofen.

BEHAVIOR:

Pacific Camps reserves the right for the Director to suspend a child from Pacific Camps at any time for any length of time. If deemed necessary by the Director, a parent will be notified to come and pick up their child **within one hour**.

- Pacific Camps is designed for children who want to cooperate and participate in activities. Each child’s good behavior is imperative to the success of Pacific Camps. Children who are physically aggressive, defiant to authority etc. may be allowed to attend on a trial basis. We reserve the right to dismiss any child whose behavior hampers the Camp experience for others without refund of fees paid.
- Pacific Camp’s discipline is designed to promote the development of self-direction, self-control and socially acceptable behavior. This is accomplished through: sensitivity, consistency, firmness, fairness and follow through. We strive to maintain a loving and positive atmosphere and reinforce the structured boundaries required. Any form of discipline involves specific learning processes.

Below are examples of behavior and resulting corrective actions. These lists are not meant to be exhaustive:

Minor behavioral incidents:

BEHAVIOR Yelling inside, picking on others or cheating
CORRECTIVE ACTION 2 min. to 5 min. of silent time out and debrief, sit out of activity or have a privilege denied

Major behavioral incidents:

BEHAVIOR Talking back to staff, not listening to staff, fighting/aggressive behavior, swearing, damaging property or running away from staff
CORRECTIVE ACTION A parent conference will be necessary for all major behavioral incidents. This meeting will consist of a discussion of the child’s behavior, outlining a plan of action to eliminate the behavior, and a discussion of the consequence for that day’s behavior and for if the behavior should persist. All of this will be documented on our Parent Conference Record (**PCR**) and signed by the site director, the parent and the child. The PCR will then be filed in the camper’s file for future reference. Any unusual incidents will be reported to Oregon State Licensing as required.

Consequences for both minor and major behavioral incidents are at the **discretion of the site director**. Except in the case of aggressive behavior towards others where the Pacific Camps’ policy is suspension with a parent conference. The duration of the suspension is up to the discretion of the site director.

Pacific Camp Family Resource, Inc.
Assumption of Risk, Release of Liability & Indemnity Agreement

In consideration of the services of Pacific Camp Family Resource, Inc., their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf, including designers, manufacturers, and installers of any climbing walls & skate parks, equipment, or programming (hereinafter collectively referred to as "Pacific Camps"), I, (hereinafter also referred to as "climber, skater, participant, or camper") hereby agree to release and discharge Pacific Camps on behalf of myself, my children, my parents, my heirs, assigns, or personal representative and estate.

I acknowledge that climbing on artificial climbing wall, fixed or portable, or the use of other climbing apparatus, or the use of skate park equipment entails many inherent, known, and other unanticipated risks which could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks cannot be eliminated without jeopardizing the essential qualities of the activity. I also know and accept that climbing or instruction by Pacific Camps is not intended to prepare me for the risks and hazards of outdoor climbing or other use of climbing equipment and facilities. I know that by participating in the activities described, I risk personal injury or death from many causes, including (but not limited to) the following: (a) slips, trips, or falls while using the facilities or equipment, climbing walls, and skate parks, loose and/or damaged artificial holds, landing surfaces, floors, stairs, and/or ramps; (b) entanglement with ropes or other equipment; (c) failure to climb or belay safely or within my own ability; (d) misuse or failure of the facilities or equipment; (e) involvement in falls of other persons or their equipment, or involvement in falls in which I or my equipment strikes or becomes entangled with others; and (f) reliance upon inexperienced persons assisting me in the preparation, inspection, or use of harnesses, and other equipment.

I know that risks exist in all places and in all activities conducted by Pacific Camps, including the use of climbing walls, skate parks, program events, or transportation to or from an event as well as in the use of other equipment, and participation in classes or activities sponsored by Pacific Camps. I also know that safety equipment, proficiency checks, supervision, and enforcement of rules by Pacific Camps do not and cannot guarantee my or my child's safety. Therefore, I Freely Accept and Fully Assume the Risk That I or My Child Can Get Hurt, not only in the ways described above, but also in ways that are unknown and unexpected, and even if I follow the instructions or advice of Pacific Camp's employees.

I choose to use Pacific Camp's facilities and equipment in spite of the risk of injury or death, and in addition to the representations I have made above, I agree as follows:

I Hereby Waive And Release Any And All Claims that I or my heirs have or may have in the future against Pacific Camps for any loss, damage, expense, or injury, including death, suffered from or in connection with my use of these facilities or equipment, or participation in activities sponsored by Pacific Camps, due to any cause whatsoever, including Negligence on the Part of Pacific Camps.

Parent Initials: _____

I Hereby Relieve Pacific Camps From Any Duty To Protect Me From Harm, and agree that even if Pacific Camps chooses to implement safety procedures, such actions shall not alter the fact that Pacific Camps has no duty to protect me.

Parent Initials: _____

I Will Hold Harmless And Indemnify Pacific Camps for liability for property damage or personal injury, including death, to myself and any other person resulting from or arising in connection with my use of these facilities or equipment, or participation in activities sponsored by Pacific Camps.

Parent Initials: _____

I have had sufficient opportunity to read and understand this Agreement and intend that it be binding on me, my heirs, executors, administrators, administrators, and assigns.

You can get hurt using these facilities and equipment. If you do not wish to accept the risk of injury or death, then you may return this release unsigned.

Parents of children under Age 18 Must Sign This Section and Initial All Blanks Above.

I am the parent or guardian of the minor named above. I hereby make and enter into each and every representation, waiver, release and indemnity described above on behalf of myself, the minor, and any other parent or guardian of the minor. I intend to give up my right, the minor's right, and the right of any other parent or guardian to maintain any claim or suit against Pacific Camps arising out of the minor's use of Pacific Camp's facilities or equipment, or participation in activities sponsored by Pacific Camps. I believe and represent that I HAVE LEGAL AUTHORITY TO MAKE THESE WAIVERS AND RELEASES, and I agree to indemnify Pacific Camps for all liability arising out of any lack of authority on my part to make such waivers and releases.

Date _____

Signature of Parent

Parent's Name (Print)

Child's Name (Print)

E5

Sign-In/Out • Drop-Off/Pick-Up • Transportation

Sign-In / Out:

All campers must be signed in/out at the front desk upon arrival/departure. Your child will be considered part of and under the care of our licensed program/facility from the time they are signed in at the front desk until the time they are signed out. If transported by an agency, they will be signed in by staff as soon as they cross the threshold of the licensed facility. If transported by a parent or authorized individual, that individual must sign the child in at the front desk. Campers will be signed out when a legal guardian, parent, or parent's authorized agent signs them out on our daily attendance log.

Drop-Off / Pick-Up:

A Drop-Off / Pick-Up form must be filled out weekly for each child. Forms are located at each front desk or on the website and should be submitted by end of day Friday for the following week. This form must be completed in order for your child to attend the After School Program. PACIFIC CAMPS IS NOT RESPONSIBLE FOR PICKING UP CHILDREN WHO DO NOT HAVE A CURRENT "CHILD DROP OFF/PICK UP FORM" ON FILE. **It is the Parent/Guardian's responsibility to inform Pacific Camps of any changes to your child's schedule no later than 10:00 am the day of the change.** The only exception would be something beyond your control such as your child going home from school due to illness, in which case, you should notify Pacific Camps as soon as possible. Your cooperation in this matter is essential to the effectiveness and safety of our program.

Additional Fees:

The following violations will result in a \$13 fee per child per violation (fee doubles after 3 violations)

NO FORM- If you have not completed a "Child-Drop Off/Pick-Up Form" for the week and your child arrives expecting a ride, Pacific Camps will take them, and there will be a charge.

NO CALL- If your child is scheduled for transportation by Pacific Camps but was transported by someone else without notifying the Pacific Camps Front Desk, there will be a charge. Locating a child who did not show for scheduled transportation takes several staff members and their time.

2nd TRIP- If your child misses a scheduled pick up **for any reason** and we must return to the school to pick them up, there will be a charge.

SPECIAL TRIP- Any extra trips to school to pick up your child outside of our regular pick up route. This would include: breakfast, band, sports, etc. All special pick ups must be pre-approved by the site director.

Transportation Guidelines:

- Campers are to report to the Pacific Camps vehicle after the bell rings or when dismissed from class.
- Once children board the Pacific Camps vehicle, children may not leave the vehicle for any reason. This means, wanting to talk to friends or for any item(s) left in the classroom/school. It is the child's responsibility to gather all things before coming to the vehicle.
- Campers may not stand up, move around, or unbuckle their seatbelt once they enter the vehicle.
- Once seated, the child's back should be against the seat back with their seat belt tightened.
- Campers may talk in the vehicle without yelling, screaming, or cursing.
- Campers may not eat food in vehicles and food must remain in their backpacks.
- Campers may not drink in the vehicles and drinks must be sealed and unopened in their backpacks.
- If any child destroys property in the vehicle, the parent(s) will be held liable for repairs.
- Campers are not allowed to use cell phones unless pre-approved by a Director.
- Drivers are on scheduled routes, and they pick up children from more than one school. Therefore, children need to promptly arrive at the pick up area to ensure that all children can be picked up in a timely fashion.
- Campers are to enter/exit the vehicles without shoving and pushing.
- Campers are to exit the vehicle with all of their belongings.
- All body parts covered by clothing should not be shown to any one else.

By signing below, I understand and agree to the preceding policies, procedures, and guidelines.

Child's Full Legal Name: _____ Date: _____

Parent Signature: _____ Date: _____

T1

Pacific Camps and Family Resources

Admission Agreement

In applying for admission of my child to Pacific Camp Family Resource, Inc., I attest that I have received a copy of the Parent Handbook, and that I have read and clearly understand the policies, rules, and requirements stated, and I agree that I will comply with the policies.

I understand that I will be given a 30 day written notice prior to any change in policy or fee schedule and agree to comply with any changes made. I agree and understand that I am responsible for keeping myself updated and informed regarding Pacific Camp's policies and program activities as well as any changes made. Failure to follow Pacific Camp's policies may lead to termination of childcare services. In addition, the inspection authority for Pacific Camp Family Resource, Inc. in Oregon is:

Oregon Employment Department Child Care Division
www.childcareinoregon.org
1-800-556-6616

Oregon Employment Department Child Care Division shall have the authority to interview clients, including children or staff, and to inspect and audit client or facility records without prior consent. The Licensing Agency shall make provisions for private interviews with any clients, including children or staff, and for the examination of records relating to the operation of the facility.

Oregon Employment Department Child Care Division shall have the authority to observe the physical condition of the client, including conditions, which could indicate neglect, abuse, or inappropriate placement, and to have a Licensed Medical Professional physically examine the client. All Pacific Camp Family Resource staff are mandated reporters. If any staff person suspects a child is being physically, sexually, verbally, or emotionally abused, they are required by law to report this to Child Protective Services.

This agreement shall be in effect until a child leaves Pacific Camp with a two week written notice to the Director or at the end of the six-week trial period. Modifications to this agreement shall be made whenever circumstances require such changes. No refunds will be made for services already rendered.

I have read and agree to the conditions and policies stated in the Parent Handbook.

Parent/ Legal Guardian Signature

Child's Printed Name

Date

PACIFIC CAMPS SCHOOL AGE CONTRACT ENROLLMENT

CONTRACT

I understand that I am enrolling in a contract for Pacific Camps child care program. I understand that this holds my space for the term of the contract, and I am responsible for all fees associated with it. I understand that Pacific Camps does not prorate for absences or by the hour. Extra fees will apply for attendance on non-contract days or programs. Contract does not include registration fee, early dismissal days, in service days or holidays unless otherwise stated. I understand that I will pay the first payment at time of enrollment and it is non-refundable.

FEES AND PAYMENTS

Electronic Fund Transfer (EFT) is required for all participants in child care programs contract. The first week’s payment is due at enrollment and is non-refundable. For remaining payments, withdrawals are made on Thursday nights (for the following week) for weekly payments or closest business day. Please fill out the attached EFT form and return with the registration. A \$3.49 transaction fee will apply for credit cards. Should electronic transfer of funds be denied, account holder will be charged a processing fee of \$30.00. I understand it is my responsibility to check my account for Pacific Camps transactions. I will notify Pacific Camps within 60 days of the transaction date of any transaction that appears to be in error. The transaction will be investigated and corrected if necessary. If payment is not made my child may NOT be admitted to the program. If the account becomes SEVEN (7) days delinquent, enrollment in the program may be terminated unless arrangements have been made with the billing department. Payments are the responsibility of the individual who enrolls the child(ren) in the program. Pacific Camps does not prorate for absences or by the hour. Full payment is due regardless of the number of days my child attends. Extra fees will apply for attendance on non-contract days or programs.

CANCELLATIONS/CHANGES/VACATION

A 30 day written notice is required for any schedule change or cancellation of enrollment. Schedule changes will be considered on a space availability basis and are not guaranteed. I understand that there will also be a charge of an additional \$25 for each change. Cancellation of a contract will result in an early termination fee of \$700 payable in full upon notice of cancellation. In order to use the approved vacation time from the contract, 2 weeks during the summer and 3 weeks during the school year, I understand that I need to send an email to: sandy@pacificcamps.com, 2 weeks prior to the scheduled date of the auto payment with the word “Vacation” in the subject line and what week you are using.

Check which program(s) you are contracting for:

- | | |
|---|--|
| <input type="checkbox"/> Annual Contract – Summer 2018 + ASP/Vacation 2018-2019 (all inclusive attendance)-\$110/week | |
| <input type="checkbox"/> After School Contract Autopay -\$93/week | <input type="checkbox"/> After School Contract Non-Autopay - \$98/week |
| <input type="checkbox"/> Before School Contract Autopay -\$58/week | <input type="checkbox"/> Before School Contract Non-Autopay - \$63/week |
| <input type="checkbox"/> Before/After School Contract Autopay -\$140/week | <input type="checkbox"/> Before/After School Contract Non-Autopay - \$145/week |
| <input type="checkbox"/> Summer Camp Contract Autopay -\$163/week | <input type="checkbox"/> Summer Camp Contract Non-Autopay - \$168/week |

Summer Week Scheduled- Choose a minimum of 9 weeks, weeks added later will be at full non-contract price.

- | | | | | | |
|-------------------------------------|--|-----------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| <input type="checkbox"/> June 18-22 | <input type="checkbox"/> June 25-29 | <input type="checkbox"/> July 2-4 | <input type="checkbox"/> July 9-13 | <input type="checkbox"/> July 16-20 | |
| <input type="checkbox"/> July 23-27 | <input type="checkbox"/> July 30 – Aug 3 | <input type="checkbox"/> Aug 6-10 | <input type="checkbox"/> Aug 13-17 | <input type="checkbox"/> Aug 20-24 | <input type="checkbox"/> Aug 27-31 |

Child(rens) Name: _____

Camp Location: _____

Contract Start Date: (mm/dd/yyyy) _____

Contract End Date: (mm/dd/yyyy) _____

Parent’s Name: (print) _____

Parent’s Signature: _____ Date _____

AUTOPAY FORM

Section I

Please set me up for Electronic Fund Transfer (EFT) automatic payment on: (check which plan you're enrolled in):

_____ Monthly schedule on the 1st

OR

_____ Weekly schedule: Every Thursday beginning _____.

Responsible Party's email address(s) _____

EFT Account Information: Please check one of the following:

Check (attach voided check)

or

Visa Master Card Discover American Express

Name EXACTLY as it appears on card: _____

Card Number: _____

Expiration date: _____

CVV2 value: (3 digit security code on back): _____

I authorize PACIFIC CAMP FAMILY RESOURCE, INC. to charge my credit card for childcare services, snacks, late fees, or any other fees associated with my account. I understand a \$3.49 transaction fee will be charged for all credit card charges. Should electronic transfer of funds be denied, I, the account holder, will be charged a processing fee of \$30.00. If the account becomes SEVEN (7) days delinquent, enrollment in the program may be terminated unless arrangements have been made with the billing department. I understand it is my responsibility to check my EFT-linked account for Pacific Camps transactions. I will notify Pacific Camps within 60 days of the transaction date of any transaction that appears to be in error. The transaction will be investigated and corrected if necessary. A 30 day written notice is required to discontinue enrollment in the program or change in schedule. We can accommodate schedule changes on a space availability basis. If no notice is received for a change or withdrawal, one month's program fees will be charged. We will also charge an additional \$25 for each change. Cancellation of a contract will result in an early termination fee of \$700 payable in full upon notice of cancellation.

Section II

Please fill in all children's names and program rate for each child:

Child's Name

Program rate

Child's Name

Program rate

Child's Name

Program rate

By signing below, I accept the financial responsibility for all charges from Pacific Camp and Family Resource, Inc. for the above named child(ren's).

Name of Responsible Party (Print)

Signature

Date