

# Summer Registration



## Summer of Wonder 2025

\*REGISTRATION DATE: \_\_\_\_\_

<u>Parents Name or Names</u>			
X			
X			
Address:	State	City	Zip
Phone Number (____)_____		Email: _____	
Phone Number (____)_____		Email: _____	

Childs Name	AGE/ DOB	Schedule			Days of the Week					
		FD	1/2 A	1/2 B	MON	TUES	WED	THURS	FRI	



Activity Fee PAID \$ _____
DATE: _____

Please check the weeks  
your child will be  
attending.

Weeks & Dates	Camp Themes	X
June 10th- June 13th	Ocean Adventures	
June 16th- June 20th	Animal Kingdom	
June 23rd- June 27th	Outer Space Explorer	
June 30th- July 3rd	Creative Arts	
July 7th- July 11th	Bug Bonanza	
July 14th- July 18th	Wacky Science Week	
July 21st- July 25th	Carnival Fun	
July 28th- August 1st	Nature Explorer	
August 4th- August 8th	Super Hero Training	
August 11th- 15th	End of the Summer Celebration	