

2012 MoBu Kids Spring Break Camp 3-5 Year Olds



www.MoBuKids.com
442 South Washington St., Falls Church, VA 22046
703-241-PLAY (7529)

Registration Form

Child's Name: _____ Birthdate: _____

Registration is on a first come first served basis. Our camps are very popular and have limited space. We recommend that you register early to ensure a space for your child! Please bring a change of clothes, drink and nut-free snack for your child. Please indicate the days you wish to enroll your child below by placing a check mark next to all dates and times that apply. Advance payment is required to save your child's space in camp. Online registration is also available at www.mobukids.com. Please bring completed attached form on or before the first day of camp. A 10% discount is given to those who register by March 1, 2012.

Three-Day Morning Program for 3-5 yrs (\$125) - Mon/Wed/Fri 9:15 - 12:15

Two-Day Morning Program for 3-5 yrs (\$85) – Tues/Thur 9:15 - 12:15

Two-Day Afternoon Program for 3-5 yrs (\$75) – Tues/Thurs 1:15 - 4:15 pm

Spring Break Camp Options

Theme: Under the Sea

_____ April 2, 4, & 6 (Mon/Wed/Fri 9:15 – 12:15)

Early Bird Rate: \$112.50

After March 1, 2012: \$125

Theme: Hawaiian Luau

_____ April 3 & 5 (Tues/Thur 9:15 – 12:15)

Early Bird Rate: \$76.50

After March 1, 2012: \$85

_____ April 3 & 5 (Tues/Thur 1:15 – 4:15)

Early Bird Rate: \$67.50

After March 1, 2012: \$75

***Children must be potty-trained and at least 3 years old by the start date of the first chosen week.**

Parents' Name(s): _____

Home Address: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Emergency Contact Name: _____

Emergency Contact Phone #: _____

E-Mail _____

Please list any allergies, medical conditions, or special needs that your child has:

Names of persons authorized to pick up child (Driver's License required at pick-up): _____

Registration requires this form and full tuition payment. **ALL PAYMENTS MADE TO MoBu Kids ARE NON-REFUNDABLE.** If your child cannot make the day of his/her scheduled camp, a credit will be given. If the camp(s) you selected are full, a full refund will be given to you.

Parent Signature: _____

Date: _____

For Office Use Only: Date Registration Recvd: _____ Total Due: _____ Check # _____

Date Registered: _____ Receipt # _____