



**Cathedral of Faith Christian School  
Camp Cathedral 2025 Summer Program  
Ages: 3 to 9  
June 16<sup>th</sup> – August 15th**

**Camper's Information:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ DOB \_\_\_\_\_  
Address (Include City, State & Zip) \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Gender: M or F Race: \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

**Emergency Contact/ Responsible Party Information:**

Responsible Party Name: \_\_\_\_\_ Relation to Camper: \_\_\_\_\_  
DOB: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Driver's License #: \_\_\_\_\_  
Employer \_\_\_\_\_ Work #: \_\_\_\_\_ Cell Phone # \_\_\_\_\_  
Work Address \_\_\_\_\_ Email: \_\_\_\_\_

Responsible Party Name: \_\_\_\_\_ Relation to Camper: \_\_\_\_\_  
DOB: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Driver's License #: \_\_\_\_\_  
Employer \_\_\_\_\_ Work #: \_\_\_\_\_ Cell Phone # \_\_\_\_\_  
Work Address \_\_\_\_\_ Email: \_\_\_\_\_

If parents are Co-Parenting, with whom does the child reside? \_\_\_\_\_

**Additional required forms:** Medical History, Health Care Authorization, and Authorized Pick-Up List,  
Field Trip Permission Slip, Liability Waiver Form

**\*A completed application and initial fees must be received in order for child to attend camp!**

**Registration Fee: - \$100.00  
Weekly Camp Rate: \$200.00  
Camp Hours: 6:30 a.m. thru 6:00 p.m.**

**Late Fee  
Late Pick-Up Fee**

**\*\$50.00 - payments not received on Monday (\*prior arrangement made).**  
**A charge of \$1.00 per minute, per child who is picked up after**  
**6:00 p.m. is to be paid by the parent or person(s) picking up**  
**the child upon arrival. This money will not be applied to your**  
**account; it must be paid on the day of the late arrival.**



Please check the dates the camper will attend: There will be a \$50.00 a day fee for no-shows if you do not notify the office at least one week in advance of changes or absences. This fee is to reserve your child's spot in the program. **IF A CHILD ATTENDS ANY PART OF A WEEK, THE FULL WEEKLY RATE APPLIES. Camp fees are due each Monday morning upon sign-in for that week. We offer Zelle, Brightwheel and Automatic Payment draft.**

### Summer Camp Schedule

Week	Yes	No	Week	Yes	No	Week	Yes	No
June 16 - 22			July 07 - 11			July 28 - Aug 01		
June 23 - June 27			July 14- 18			Aug 04 - Aug 08		
June 30 - July 04			July 21 - July 25			Aug 11 - Aug 15		

**Camp will be closed July 4, 2025 in observance of Independence Day.**

**Campers will be supplied free breakfast, lunch, and snacks daily.**

**\*\*NOTE: Breakfast will be served from 8:30 a.m. until 9:00 a.m. ONLY!!**

Campers will need to wear sneakers daily, no open toe sandals. If the camper is not wearing the proper footwear, he/she will not be permitted to participate in outdoor activities for safety reasons.

**NOTE: If payment is delinquent by two (2) weeks, your child will be suspended from this program. There will be no exceptions.**

Parent/Guardian understands that the school's Principal reserves the right to request withdrawal of a child that is unable to adjust to the program. I have read and acknowledge the attendance and payment policy.

Parent/Guardian Print \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Administrator Print \_\_\_\_\_

### **ACH: Sign up for automatic debit with Brightwheel.**

I (full name) \_\_\_\_\_ authorize Cathedral of Faith Christian School to charge my bank card indicated below weekly for my Weekly Camp Rate.

Card Number: \_\_\_\_\_ Card Expiration \_\_\_\_\_

Digits to Billing Address \_\_\_\_\_ Zip Code \_\_\_\_\_ Weekly Billed Amount \$ \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Cathedral of Faith Christian School in writing of any changes in my account information or termination of this authorization at least 5 days prior to the next billing date. In the case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF) I understand that Cathedral of Faith Christian School may at its discretion attempt to process the charge again. I agree not to dispute this recurring charge with the bank as long as the transaction corresponds with terms agreed upon.