

SUMMER FRIENDS
CONTRACT/AGREEMENT
2020

This is a contract between Mr./Mrs. _____ and
Summer Friends Day Camp for my child/children
_____.

A one week deposit in the amount of \$310.00 is given to Summer Friends Day Camp, which will pay for the first week of camp. Week 2 is prorated at \$278.00 to the July 4th holiday.

3 day rate at \$245.00 & 2 day rate at \$180.00 per week for the same hours.

I understand that the one week deposit is non-refundable for any reason should my child/children not attend camp.

I understand regular camp hours are from 9:00am-4:00pm. The weekly charge for these hours at camp is \$310.00. I agree that all weekly payments will be made one week in advance.

I also agree to pay for every week my child is registered for, regardless of absences for ANY reason & without exception.

Summer Friends also provides extended hours from 7:00am-9:00am & 4:00-6:00pm. These hours are payable at the end of the week and charged a rate of \$5 per hour. Parent is not responsible for more than \$50.00 per week extended care .

My child/children is/are registered for _____ weeks.

I, _____ hereby willingly authorize Summer Friends Day Camp to charge my credit card for the balance of any charges not paid by the last day of camp, August 21st, 2020 if there is an outstanding balance.

Credit card type _____ & cc # _____ Exp. _____ CVC code _____

Mother's Name (print) _____ Signature _____ Date _____

Father's Name (print) _____ Signature _____ Date _____