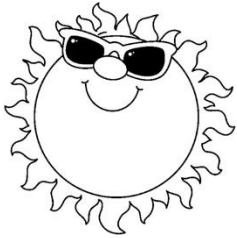


# Corner Canyon Academy Draper

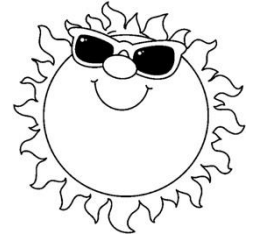
12958 South 1300 East, Draper, Utah 84020

801-523-3868

www.cornercanyonacademy.com



## Summer Fun Camp 2022



Daily Workshops Including...  
Reading\* Math\* Sports/Games\* Arts/Crafts  
STEM\* Outdoor Play\* Dance/Movement\* Singing

3 Days Per Week – Tuesday, Wednesday, Thursday

Time - 9:00 AM - 1:00 PM (4 Hours per day)  
Drop Off - 9:00-9:10, Pick Up - 12:50-1:00  
\*Tuition - \$525.00 (includes all 6 weeks)

\*Students must bring a sack lunch and drink to school on each school day.

June Dates

Week 1: 14, 15, 16  
Week 2: 21, 22, 23  
Week 3: 28, 29, 30

July Dates

Week 4: 12, 13, 14  
Week 5: 19, 20, 21  
Week 6: 26, 27, 28

\*To secure your child's space in Summer Fun Camp please send/bring in your registration form with a ~~\$250.00 Non-refundable Deposit~~, paid with cash, credit card, or check (made out to Corner Canyon Academy). The remaining balance will be due on May 27<sup>th</sup>, 2022.

Name of Child: \_\_\_\_\_ Birth Date \_\_\_\_\_ Gender: Male/Female (circle one)

Name you would like child called at School (if different) \_\_\_\_\_

Parent/Guardian #1: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Other Phone Number: \_\_\_\_\_

Parent/Guardian #2: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Other Phone Number: \_\_\_\_\_

Student Home Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Email Address (please write as neatly as possible): \_\_\_\_\_

**Summer Fun Camp Non-Refundable \$250.00 Deposit**

\*Please fill in the following information if you would like to pay by Credit Card. Your credit card will be charged a deposit of \$250.00 and the remaining balance is due May 27, 2022

Name on Card: \_\_\_\_\_ Billing Zip \_\_\_\_\_

Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp: \_\_\_\_ / \_\_\_\_ CVV Code: \_\_\_\_\_

Signature: \_\_\_\_\_

*I understand that once I have paid the Registration Fee, it is not refundable.*

Check the box if you would like the remaining balance charged to your credit card on May 27, 2022.

# Summer Fun Camp 2022

\*Please fill out and attach to page 1 of the Summer Fun Camp Registration form and return with payment.

### Emergency Contacts

Other person(s) authorized to pick up student, or call if parents cannot be reached:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

### FOOD ALLERGY INFORMATION

CHILD'S NAME: \_\_\_\_\_ Food Allergies (list only food allergies that we need to be aware of at school, please note: if your child has a severe food allergy the parent will need to provide the child's own snacks at school as well as any medical supplies necessary, such as an Epi-Pen):

NO FOOD ALLERGIES: \_\_\_\_\_ YES (Describe): \_\_\_\_\_

#### SUMMER FUN SCHOOL FOOD PERMISSION FORM

\*During Summer Fun School, we may prepare foods that go along with our theme. Please indicate if your child has permission to participate in any/all of these activities.

Please check the box that applies:

- My child may eat the food cooked/prepared at Summer Fun Camp without any restrictions.
- My child may NOT eat food/snacks made/given at Summer Fun Camp.
- My child may eat the food cooked/prepared at Summer Fun Camp with the following restrictions.

Please list food restrictions: \_\_\_\_\_  
\_\_\_\_\_

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_ (Self) hereby give permission for my son/daughter to attend Corner Canyon Academy. In lieu of extending my permission, I will also hold harmless, Travis Larson, Sara Larson and any or all teachers, staff, aides, parents, et al, who are connected with Corner Canyon Academy, salaried or not, from any accident or injury to our child, \_\_\_\_\_ (Child's Name), for which Corner Canyon Academy will not be held legally liable.

In the event my son/daughter, \_\_\_\_\_ (Child), is injured, as a result of an accident, while attending Corner Canyon Academy, I hereby give my permission to all duly authorized persons connected with Corner Canyon Academy to administer first aide. I have read the above, and I am in agreement with its contents.

Print full given name of Parent/Legal Guardian: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_