



2024-25 PILGRIM LUTHERAN SUMMER CARE

Email: Sarazetler@pilgrimluth.org Phone: 920-965-2234

ENROLLEE: For children 3 years old and potty trained through those completing 5th Grade

Name of Child: _____

Last

First

Middle

Address: _____

Home Phone: _____

Emergency Phone: _____

Email address: _____

Completed Grade in May 2024: _____

PARENT INFORMATION:

Father: _____

Mother: _____

Father's Work Phone: _____

Mother's Work Phone _____

Cell Phone: _____

Cell Phone: _____

Employer: _____

Employer: _____

Occupation: _____

Occupation: _____

Child's Date of Birth: _____ List any **allergies to foods or medicines:** _____

CHILD'S PHYSICIAN OR MEDICAL FACILITY:

Doctor's Name: _____ Clinic Name: _____

Address: _____ Phone: _____

Who is authorized to pick up your child? _____

CHOICE OF WEEKS: Please write 5-days, 4-days, or 3-days behind weeks selected. If choosing 3 or 4 days, state which days care are needed.

5-days = \$230/week, 4-days = \$200/week, or 3-days = \$150/week

May 29-31 _____

June 3-7 _____

June 10-14 _____

(Closed Monday & Tuesday)

June 17-21 _____

June 24-28 _____

July 1-5 (Closed for cleaning)

July 8-12 _____

July 15-19 _____

July 22-26 _____

July 29-Aug 2 _____

Aug 5-9 _____

IMPORTANT NOTE:

Must be at childcare for 7 weeks or more to qualify for care. Fees are subject to change.

There is a non-refundable fee of \$125 due with the enrollment form. If signing up after 4/1/24, the activity fee increases to \$175.

Office Use Only: Date Submitted _____ Amount & Type of Payment _____