

Dar-Us-Salaam Summer Programs 2008 Registration – Children & Youth (7+) (ages may vary per program)

Phone: 301-982-2402 / Web: www.alhuda.org / Fax: 301-982-2325 / email: summercamp@alhuda.org

Student Name				DOB		Age		Gender	
Father Name		Home #		Work #		Cell #			
Mother Name		Home #		Work #		Cell #			
Address									
City				State		Zip			
Father Email				Mother Email			Referred by		
Emergency Contact				Relationship			Daytime Phone		
Emergency Contact				Relationship			Daytime Phone		

Select Program	Timings and Dates	Cost	Total
LA/Math Camp 2008 (Ages 7 to 11) (includes daily sports and occasional field trips)			
<input type="checkbox"/>	6 weeks from June 23 to August 1 M-Th:9am to 3:15pm (Fri:9am-2:15pm)	\$525	
Summer Intensive Arabic (Ages 7 and above) (includes daily sports and occasional field trips)			
<input type="checkbox"/>	6 weeks from June 23 to August 1 M-Th:9am to 3:15pm (Fri:9am-2:15pm)	\$525	

- Has this applicant ever been tested or screened for:
 - Psychological / Emotional Disabilities: Yes No If yes, then please explain: _____
 - Learning Disabilities Yes No If yes, then please explain: _____
- Does the applicant have any health concerns such as allergies, asthma, conditions, surgeries, disease, etc.? Yes No
If yes, please explain: _____
- Does the applicant take any prescription medication on regular basis? Yes No
If yes, which medicine(s): _____
- Does your child need Before/After-Care? Yes No (If yes, please fill out Before/After-Care Form. Additional fees required.)
- Release: I give permission to Dar-us-Salaam Summer Programs to photograph my child for developing promotional/marketing materials for Dar-us-Salaam Summer Programs. Yes No

Field Trips/Activities and Transportation (Select available date(s))

We are requesting parents to volunteer on Wednesdays inside class or on field trips as chaperones. Please select one Wednesday when you can volunteer.	Select Days to Volunteer: Wednesday <input type="checkbox"/> June 25 <input type="checkbox"/> July 2 <input type="checkbox"/> July 9 <input type="checkbox"/> July 16 <input type="checkbox"/> July 23 <input type="checkbox"/> July 30
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Can you offer a van so we can carpool to take students if there is a field trip on the Wednesday you chose? Yes No

	SUBTOTAL	
Discount Type (choose one) : <input type="checkbox"/> Family <input type="checkbox"/> Staff <input type="checkbox"/> Referral	10% of Total	
Registration Fee for all Summer Camp Courses (waived if registration and payment / payment plan before April 14, 2008)	\$25/application	
Refund Policy	TOTAL	
<ul style="list-style-type: none"> Withdraw before first day of class: 100% refund Withdraw during the first week of classes: 50% refund Withdraw during the second week of classes: 25% refund Withdraw after the second week: 0% refund 		

Payment Information (Registration is not complete until FULL payment is made)

Method: <input type="checkbox"/> Check <input type="checkbox"/> Cash	CC: <input type="checkbox"/> Amex <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Discover	<input type="checkbox"/> Payment Plan (Requires Financial Agreement - available in front office)
Credit Card #:		Exp. Date:
Name on Card:	Signature:	