

DLAC Summer Camp Change Form

If you have already submitted a registration form and wish to add days to any week please fill out this form.

Campers Name : _____

Changes Required:

Add: (indicate if before/after care is needed also) Decline*:

Week 1: June 11th		
Week 2: June 18th		
Week 3: June 25th		
Week 4: July 2nd		
Week 5: July 9th		
Week 6: July 16th		
Week 7: July 23rd		
Week 8: July 30th		
Week 9: Aug 6th		
Week 10: Aug 13th		
Week 11: Aug 20th		
Week 12: Aug 27th		

Additional Payment Due: \$ _____ Date Paid: _____

Payment for any added days/extra care is required at the time of form submission.

Payment is calculated from the difference of what has already been paid for each week. For example: You paid \$139 for a 3 day camp the week of June 18th, you are adding one additional day that week, bringing your total for the week to \$169; \$30 is due when this form is submitted. If you are just adding before or after care to any day it is \$10 per care per day.

*Only applicable for unpaid days of camp.

Parent Signature: _____ Date: _____