

DELPHI Summer



Summer Camp Application

Name of Applicant _____ Nickname _____

Date of Birth ____/____/____ Age when camp starts: _____

What school? _____

How did you hear about Delphi Summer Camp? _____

Family Information

Parents' Names: _____

Street Address: _____

City/State/Zip: _____

Alternative Address

Street Address: _____

City/State/Zip: _____

Home Phone: _____

Mom's Cell: _____

Mom's Work: _____

Dad's Cell: _____

Dad's Work: _____

Please check all the weeks your child will be attending camp. Four consecutive weeks is the minimum attendance.

June 23 – June 27

July 21 – July 25

June 30 – July 3*

July 28 – Aug 1

July 7 – July 11

Aug 4 – Aug 8

July 14 – July 18

Aug 11 – Aug 15

Aug 18 – Aug 22

* Camp will be closed on Friday, 4th of July, in observance of Independence Day.

(application continued on reverse)

Summer Camp Questionnaire

1. What do you most want your child to experience at Delphi Summer Camp?
2. Which of your child's qualities do you respect and admire the most?
3. What does your child want to accomplish at Delphi Summer Camp?
4. Can your child swim? _____ If yes, can he/she participate in lifeguard supervised swimming? _____

If the answer to any of the following questions is "yes" please explain in full on separate sheet of paper.

1. Has your child ever had physical, mental, emotional, academic, or disciplinary difficulties? Yes/No
2. Has he/she ever been prescribed a medical drug for hyperactivity or study difficulty? Yes/No
3. Are there any restrictions regarding his/her physical activity? Yes/No

I certify that the above is complete and true and that the Applicant is a normal child who is a safe companion for other children. Delphi Academy reserves the right to dismiss a camper if it is believed to be in the best interest of the camp and/or the child.

I understand that a one-time application fee of \$100.00, an application form, emergency medical forms and a non-refundable deposit of \$350.00 are required to secure a space in the camp for my child. Initial payment for a new camper is \$450.00. Upon signature of this form I am agreeing to pay all fees for the camp weeks I have chosen. No refunds of summer fees or deposits can be made for any reason whatsoever.

Signature of Parent or Legal Guardian

Date

DELPHI ACADEMY™ • 11341 Brainard Avenue, Lake View Terrace, CA 91342
www.delphiLA.org • (T) 818-583-1070 • (F) 818-583-1082



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