



Location Address: 2949 N. 204th St., Suite 102, Elkhorn, NE 68022
Mailing Address: P.O. Box 516, Elkhorn, NE 68022
Phone: (402)614-5400 Website: www.HearthAcademy.com

Registration rec'd Date: _____ Time: _____

Summer Camp Total: \$ _____

Payment by: cash check ACH (5/1/24)

*To be completed by school

SUMMER CAMPS 2024 REGISTRATION FORM

Thank you for choosing The Hearth Academy Preschool! We are glad you have chosen to participate in our summer camps this year. Our summer camps provide fun and learning opportunities for ages 3 (must be potty-trained) to 6 years of age. ****Please complete a separate registration form for each child. Thank you!***

Child Name _____ Birthdate _____ Age (on June 1st) _____ Boy _____ Girl _____

Name to be used in class _____ Allergies/Special Needs _____

Has your child attended any program(s) before? Yes or No If so, where? _____

Parent (Guardian) Name _____

Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____ E-mail: _____

Emergency Contact Name _____ Emergency Phone _____

I, _____ hereby give The Hearth Academy Preschool Staff permission to see that my
Parent/Guardian Signature
minor child(ren) receive medical treatment in an emergency.

Summer Camp Tuition: \$35.00 Per Camp

Payment is due at the time of registration. Currently enrolled families who register for more than 8 camps may contact our office to set up payment arrangements and/or automatic ACH withdrawals. ***Our planning and staffing needs are based on planned attendance as of April 30, 2024; Therefore, NO REFUNDS can be made after that date.**

Camp Name: _____ Camp Date(s): _____ Total: \$ _____

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***Please continue any additional camps on back.**

Total Due: \$ _____