



**Hillsboro Christian Preschool**  
 6356 Hillsboro Lane  
 Crozet, VA 22932  
 434.823.5342

Appl. Received \_\_\_\_\_

Check Amount \_\_\_\_\_

**Application Form Summer Camp - 2010**

Child's Name \_\_\_\_\_ Name Used \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Male/Female

Birth date \_\_\_\_\_ Toilet Trained? Yes No In Process

Father's Name \_\_\_\_\_ Age \_\_\_\_\_

Occupation \_\_\_\_\_ Employed by \_\_\_\_\_

Business Address \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Mother's Name \_\_\_\_\_ Age \_\_\_\_\_

Occupation \_\_\_\_\_ Employed by \_\_\_\_\_

Business Address \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

If your family attends church, where? \_\_\_\_\_

Are parents: Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Deceased \_\_\_ Single \_\_\_

Names, ages, and sex of other children in the family \_\_\_\_\_

List others living in the household \_\_\_\_\_

What form of discipline do you use at home? Time out \_\_\_ Scolding \_\_\_ Spanking \_\_\_

Verbal Correction \_\_\_ Other \_\_\_\_\_

Person responsible for child if both parents work \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone \_\_\_\_\_

Cost: \$400.00 for the summer \_\_\_\_\_ 1 payment (due June 15)

\_\_\_\_\_ 2 payments (1/2 due June 15 - 2<sup>nd</sup> 1/2 due July 15)

List any medical, mental, or emotional problems including any allergies we need to be aware of

\_\_\_\_\_  
 \_\_\_\_\_

\* I understand that I must commit to the entire summer program which is Monday, Wednesdays, and Fridays for the summer beginning Tuesday, June 15- Thursday, August 12 from 9:00 am to 12:00 noon. I will owe the entire cost of \$400 even if I withdraw my child from the program early.

Parents' Signature \_\_\_\_\_

\*\*\* The children will need to bring a snack each day. No peanut products please.\*\*\*