



Grace Lutheran Church Early Childhood Center
422 Valhi Blvd. Houma, LA 70360
985-360-3618 ecc@gracehouma.org
www.gracehouma.org

Summer Fun

May 30-July 21, 2023

A Christian Summer Day-Camp Program for Ages 2-5

Choose the week(s) that you want your child to attend

Registration & Supply Fee per child- \$75
(One-time Non-Refundable)

Half Day (8 a.m. – 12 p.m.) \$100/wk
(\$80 May 30-June 3) (\$60 July 5-7)

Full Day (7 a.m. – 5:30 p.m.) \$150/wk
(\$120 May 30-June 3) (\$90 July 5-7)

****Holiday No School- Monday, May 29**
Monday, July 3/Tuesday, July 4

Full Day Children bring a bag lunch

Half Day Children Do Not bring a bag lunch
(dismissed before lunch time)

(There will also be a Bible story each week)

Grace Lutheran ECC Summer Fun Registration Form

Please indicate the week(s) your child will be attending. A **\$25** deposit for **each week** is needed for **Half Day** and a **\$50** deposit for **Full Day**. This will hold your child's spot for that week, will be applied to that week's tuition fee, and the balance will be due on the **Monday of every week. The Registration/ Supply fee and Deposits are due upon registration and are non-refundable.** A copy of your child's birth certificate, an updated shot record with an expiration date, and fees are needed to complete registration. If your child attended GLCECC this past school year, we have their shot record/birth certificate on file.

Check one: 5 Half Day (\$100) 5 Full Day (\$150)

Registration & Supply Fee- \$75 (one-time fee)

_____	May 30-June 2	_____	June 26-30
_____	June 5-9	_____	July 5-7 (Holiday Week)
_____	June 12-16	_____	July 10-14
_____	June 19-23	_____	July 17-21

Child's Name: _____ Age: _____

Date of Birth: _____ Sex _____ Grade Entering Fall 2023 _____

Address: _____ City _____ Zip _____

E Mail Address: _____

Mother's Name: _____ Cell _____

Father's Name: _____ Cell _____

Home Phone: _____ Other _____

Allergies: _____

If your child has allergies, an Emergency Plan MUST Be Completed. Please see Mrs. Sofie to get a copy.

Office use only:

Reg. /Supply fee paid Date: _____ Amt: _____ Check # _____

Deposit/tuition paid Date: _____ Amt: _____ Check # _____