



MOUNT BELL ACADEMY

2018 SUMMER CAMP APPLICATION

Student Information

Last _____	First _____	Middle _____	Gender: M F
Preferred Name _____	Birthdate: month/day/year _____/_____/_____	Age _____	Home Phone Number _____
			Grade Level _____ <small>The level the student is entering into</small>
Permanent Street Address _____	City _____	State _____	Zip Code _____

First Parent/Guardian Information

Second Parent/Guardian Information

Last Name: _____	Last Name: _____
First Name: _____	First Name: _____
Relationship to Student: _____	Relationship to Student: _____
Street Address: _____	Street Address: _____
City: _____	City: _____
State: _____ Zip Code: _____	State: _____ Zip Code: _____
Home Phone: () _____	Home Phone: () _____
Business Phone: () _____	Business Phone: () _____
Cell Phone: () _____	Cell Phone: () _____
Email: _____	Email: _____
Emergency Contact: _____	
Emergency Contact: _____	

Please indicate the program type and weeks you wish to attend by check boxes below:

<u>DAY CAMPS</u>						<u>SLEEP-AWAY CAMP</u>
<i>Young Coders</i> 9am -12noon ages 7-9 \$200/week	<i>Coding Camp</i> 9am-12noon ages 9-16 \$200/week	<i>Coding Camp+</i> 9am-3pm ages 9-16 \$500/week	<i>Coding Camp++</i> 9am-6pm ages 9-16 \$600/week	<i>Early Drop-off</i> 8:30am ages 7-16 FREE		
July 2-6* <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sunday 3pm - Sunday 10am ages 9-16 \$1250 / week	
<small>*no camp on July 4</small>					July 1-8 <input type="checkbox"/>	
July 9-13 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	July 8-15 <input type="checkbox"/>	
July 16-20 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	July 15-22 <input type="checkbox"/>	
July 23-27 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	July 22-29 <input type="checkbox"/>	
July 30-Aug 3 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	July 29-Aug 5 <input type="checkbox"/>	

Camps with less than the minimum number needed for enrollment are subject to change or cancellation.

Signature of Parent or Guardian

Date

*Please sign and return this form with the \$50 Registration Fee to Mount Bell Academy at 1095 Dunford Way, Bldg. E, Sunnyvale, CA 94087
If you have any questions you may contact us at 408-616-9472 kkim@mountbellacademy.com*