



# AEF Camp Programs

[www.aefcamps.com](http://www.aefcamps.com)

Select Program by checking box below

Day

Young Adult

Mixed / Tutorial

CIT / Jr Counselor

How did you hear about our camp? \_\_\_\_\_ Form available online at [www.AEFCamps.com](http://www.AEFCamps.com)

Camper Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Male / Female  
Circle appropriate gender

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_ (\_\_\_\_)

Date of Birth \_\_\_\_\_ Summer Age \_\_\_\_\_ Grade entering in September \_\_\_\_\_

**MOTHER'S NAME** \_\_\_\_\_

\_\_\_\_\_ Email Address \_\_\_\_\_

Home Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

**FATHER'S NAME** \_\_\_\_\_

\_\_\_\_\_ Email Address \_\_\_\_\_

Home Street Address (if same write same) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ (\_\_\_\_)

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Who has legal custody of the camper during the time he/she is enrolled? \_\_\_\_\_

In whose care may we release the camper if parents cannot be located? \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail address \_\_\_\_\_

Persons NOT permitted to remove the camper: \_\_\_\_\_

EMERGENCY CARE: As parent/guardian, I hereby give permission to AEF to seek and obtain emergency medical attention for the above camper when deemed necessary by AEF officials, and do hereby release AEF from any liability resulting from such attention. (AEF is used as an abbreviation for Alternative Education Foundation throughout this document)

Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Please complete back side of application

**Camp Hours 8:30am to 2:30pm**

Pre Care 7:30-8:30 Aftercare 2:45 to 5:30  
 Not included in cost of camp and paid separately \$60/week

**Select the weeks camper will attend below**

- Week 1: June 17 - June 21
- Week 2: June 24 - June 28
- Week 3: July 1 - July 5
- Week 4: July 8 - July 12
- Week 5: July 15 - July 19
- Week 6: July 22 - July 26
- Week 7: July 29 - Aug 2
- Week 8: TBD

Camper can attend any combination of weeks Minimum of 2 weeks required Sibling Discounts Available

**Per Week Rates and All Week Rates**

**Financial Assistance and Scholarships Available to Qualified Applicants**

	Day Camp	Young Adult	CIT / Jr. C *	Mixed **	Tutorial
Per Week	\$ 175.00	\$ 200.00	\$ 475.00	\$ 225.00	TBD
<b>10% Discount 7 Week Price</b>	\$ 1,102.50	\$ 1,225.00	\$ 2,975.00	\$ 1,400.00	TBD

- \* Discounted 7 week price requires payment in full at time of enrollment
- \* CIT/ JR Counselor must be approved by administration prior to enrolling
- \*\* Mixed Program consists of academic mornings 8:30 - 11:30 and activity camp from 12:00-2:30
- \*\*\*Pricing above is subject to change and is based on space and availability

<b>Registration Fee includes 2 camp shirts required for all campus trips</b>			<b>Shirt Size:</b> _____
New Campers	\$ 100.00	Existing Students	\$ 50.00



A non-refundable deposit equal to the amount of two weeks of camp or \$500 is required to reserve a place for the camper. Amount will be applied against total due. All balances are due in full 3 weeks before the program begins. The total due does not include transport or individual tutoring if requested (math, reading, speech/language therapy and perceptual motor training)

**Camp Focus and Goals**

Please indicate the goals you would like your child to work on during their time in our summer camp. Although your child will effectively work on most of these skills, they will help us put together a more focused program and the most suitable program for your child.

- Having Fun
- Following Directions
- Organizational Skills
- Task Analysis
- Respect
- Making Friends
- Minding own business
- Time Management
- Independence
- Appreciation
- Sharing / Taking Turns
- Enjoying Outside time
- Physical Fitness
- Decision Making
- Citizenship
- Good sportsmanship
- Being respectful
- Focus / Attention
- Manners
- Self-Esteem

Enclosed is non refundable deposit that will apply to the basic fee. I agree to pay the balance at least 3 weeks before the program begins. I understand there is no refund for late arrival or early departure from camp, if camper is dismissed because of disciplinary action, if I withdraw my child from camp, if I do not use all/any of the weeks, or any reason whatsoever. I grant permission for my child to participate in any off campus trips. I also give permission to AEF to use its transportation on all adult supervised trips and release AEF from liability. I also grant the publication of any photos taken of my child during the period he/she is in attendance at AEF Summer Program. I understand that there is no day camp on July 4th, in observance of Independence Day. I understand all camps require a non refundable deposit.

Date: \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_

**Please turn over form and fill out other side of page.**

\*\* Upon receipt of a signed application form and deposit, AEF will mail out additional forms for completion by parents or guardians, as well as more information pertaining to the camp schedule, activities, field trips etc.



AEF Summer Programs  
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