

ALC-2019 SUMMER ADVENTURE CAMP APPLICATION

GROUP 2 Entering 4th grade – completing 6th grade

Location: 40 Arlington Street, Nashua, New Hampshire

Time: **6:30 A.M. - 6:00 P.M** (Breakfast included)

Cost: \$ 245.00 per week for the first child (Monday-Friday)**
\$ 208.25 per week for the second child (Monday-Friday)**
\$ 50.00 per day / per child for part-time*

OR

Time: **7:15 A.M.- 6:00 P.M.**

Cost: \$ 235.00 per week for the first child (Monday-Friday)**
\$ 199.75 per week for the second child (Monday-Friday)**
\$ 48.00 per day / per child for part-time*

* There are no sibling discounts for part-time. ** \$10.00 per child additional fee for Canobie Lake trip on August 13, 2019.

Application Process:

- ◆ Applications for current Adventure Club Members will be accepted **BY US MAIL ONLY postmarked on or after March 25, 2019.** Please mail to “Nashua Adult Learning Center, 4 Lake St. Nashua, NH 03060.”
- ◆ Members and non-members may apply in ***person or via fax beginning April 1, 2019.*** Emailed applications are not accepted.
- ◆ All Nashua Adult Learning Center tuition accounts must be current to enroll and participate in summer camp.
- ◆ **A two (2) week tuition deposit + \$35.00 registration fee per child is required with your application.**
- ◆ The \$35.00 registration fee pays for one camp T-shirt and one tank top for each child, which are required to be worn by campers during all field trips.
- ◆ Extra shirts and tank tops may be purchased for an additional fee. Please check the appropriate boxes and enclose the additional cost with your application.
- ◆ Part time spots are available, but are limited. Call 603-882-9080 x 2212 to check availability.
- ◆ Confirmations are sent via U.S. Mail. If you do not receive a confirmation, call 882–9080 x 2212 for more information.
- ◆ Tuition assistance may be available to qualified families through the New Hampshire Department of Health and Human Services (NH DHHS). Upon request, our office will provide you with a “*Child Care Provider Verification (Form 1863)*”. For additional information about child care assistance, please visit the NH DHHS website at <https://nheasy.nh.gov/> or contact the Southern District Office, 26 Whipple Street, Nashua, NH 03060, (603) 883-7726 or (800) 852-0632.

You are strongly encouraged to sign up only for the days your child will be in attendance at summer camp. Our summer camp is not a “drop in” service. You will be charged for the days your child(ren) are signed up for, regardless of whether or not your child is in attendance.

NOTE TO PARENTS AND/OR GUARDIANS

The licensing authority for this program is the bureau of licensing and certification, child care licensing unit. Childcare programs are required to post a copy of the statement of findings and corrective action plan for the most recent visit in a location which is accessible to parents, and must maintain copies of the statement of findings and corrective action plan for the preceding visit and make them available for parents to review upon request. Statements of findings and corrective action plans are also available on-line at:

<https://nhlicenses.nh.gov/verification/Search.aspx?facility='Y';> or by calling the unit at 603-271-9025; or 1-800-852-3345 ext. 9025.

During visits to programs, licensing staff speak with children regarding the care they receive at a program if in the judgment of the licensing staff the children's response would be valuable in determining compliance with licensing rules. Licensing staff are experienced in working with children and trained to speak with children in a manner that is respectful and non-leading. Children will remain with their class or group during these conversations with licensing staff, and at no time will a child be forced to speak with a licensing coordinator.

If licensing staff believes your child may have specific information regarding an alleged event at the program, and determines that it is best to interview your child separately and not with their class or group, please indicate your preference among the following options:

- a. I give permission for child care licensing staff to interview my child at the child care program separate from his or her class or group;
- b. I wish to be notified prior to child care licensing staff interviewing my child at the child care program separate from his or her class or group;
- c. I do not give my permission for child care licensing staff to interview my child at the child care program separate from his or her class or group.

PRINT NAME: _____

SIGNATURE: _____ **DATE:** _____

Please make checks payable to:

“Nashua Adult Learning Center“

Mail enrollment packet and fees to:

ATTN: Adventure Camp
Adult Learning Center
4 Lake Street
Nashua, NH 03060

GROUP 2 Camper's name: _____

Breakfast Option: 6:30 AM – 6:00 PM

Breakfast is included. Space is limited

Cost: \$ 245.00 per week for the first child (Monday-Friday)- **Weeks 1 & 2: full time pro-rated due to shortened camp week*
 \$ 208.25 per week for the second child (Monday-Friday)-
 \$ 50.00 per day / per child for part-time-
 (* There are no sibling discounts for part-time / ** \$10.00 per child additional fee for Canobie Lake trip on August 13, 2019.)

(Please use a separate form for each child)

Child's Name: _____ Sex: M ___ F ___ D.O.B: ___/___/___
 School: _____ Grade in Sept 2019: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Parent Name: _____ Daytime Phone: (____) _____ - _____
 Email: _____

T-shirt & tank top size: (check one)	6-8 <input type="checkbox"/>	10-12 <input type="checkbox"/>	14-16 <input type="checkbox"/>	Adult S <input type="checkbox"/>	Adult M <input type="checkbox"/>	Adult L <input type="checkbox"/>
Would you like extra shirts?	<input type="checkbox"/> Extra T-Shirt (\$10.00 each)			<input type="checkbox"/> Extra Tank Top (\$10.00 each)		

SCHEDULE: You are strongly encouraged to **sign up only for the days your child will be in attendance.** Our summer camp is not a "drop in" service. You will be charged for the days your child(ren) are signed up for, regardless of whether or not your child is in attendance.

Camp Week	Full Time? <i>Monday-Friday</i>	Part-Time? <i>Please check all days that apply</i>				Estimated	
						Drop off time?	Pick up time?
6/26/19- 6/28/19 <i>Camp starts 6/26</i>	Weds - Friday* <input type="checkbox"/> \$147.00 / 1 st child \$124.95/2 nd child		Weds. <input type="checkbox"/> \$50.00 per child	Thurs. <input type="checkbox"/> \$50.00 per child	Fri. <input type="checkbox"/> \$50.00 per child	_____ AM	_____ PM
7/01/19-7/05/19 <i>Closed July 4th</i>	Mon/Tues/Weds/Fri <input type="checkbox"/> \$196.00 / 1 st child \$166.60/ 2 nd child	Mon. <input type="checkbox"/> \$50.00 per child	Weds. <input type="checkbox"/> \$50.00 per child		Fri. <input type="checkbox"/> \$50.00 per child	_____ AM	_____ PM
7/08/19-7/12/19	Monday-Friday <input type="checkbox"/> \$245.00 / 1 st child \$208.25/ 2 nd child	Mon. <input type="checkbox"/> \$50.00 per child	Weds. <input type="checkbox"/> \$50.00 per child	Thurs. <input type="checkbox"/> \$50.00 per child	Fri. <input type="checkbox"/> \$50.00 per child	_____ AM	_____ PM
7/15/19-7/19/19	Monday-Friday <input type="checkbox"/> \$245.00 / 1 st child \$208.25/ 2 nd child	Mon. <input type="checkbox"/> \$50.00 per child	Weds. <input type="checkbox"/> \$50.00 per child	Thurs. <input type="checkbox"/> \$50.00 per child	Fri. <input type="checkbox"/> \$50.00 per child	_____ AM	_____ PM
7/22/19-7/26/19	Monday-Friday <input type="checkbox"/> \$245.00 / 1 st child \$208.25/ 2 nd child	Mon. <input type="checkbox"/> \$50.00 per child	Weds. <input type="checkbox"/> \$50.00 per child	Thurs. <input type="checkbox"/> \$50.00 per child	Fri. <input type="checkbox"/> \$50.00 per child	_____ AM	_____ PM
7/29/19-8/2/19	Monday-Friday <input type="checkbox"/> \$245.00 / 1 st child \$208.25/ 2 nd child	Mon. <input type="checkbox"/> \$50.00 per child	Weds. <input type="checkbox"/> \$50.00 per child	Thurs. <input type="checkbox"/> \$50.00 per child	Fri. <input type="checkbox"/> \$50.00 per child	_____ AM	_____ PM
8/5/19-8/9/19	Monday-Friday <input type="checkbox"/> \$245.00 / 1 st child \$208.25/ 2 nd child	Mon. <input type="checkbox"/> \$50.00 per child	Weds. <input type="checkbox"/> \$50.00 per child	Thurs. <input type="checkbox"/> \$50.00 per child	Fri. <input type="checkbox"/> \$50.00 per child	_____ AM	_____ PM
8/12/19-8/16/19 <i>\$10/extra Canobie</i>	Monday-Friday <input type="checkbox"/> \$255.00 / 1 st child \$218.25/ 2 nd child	Mon. <input type="checkbox"/> \$50.00 per child	Weds. <input type="checkbox"/> \$50.00 per child	Thurs. <input type="checkbox"/> \$50.00 per child	Fri. <input type="checkbox"/> \$50.00 per child	_____ AM	_____ PM
8/19/19-8/21/19 <i>Field trip week! Last day 8/21/19</i>	Mon – Weds* <input type="checkbox"/> \$150.00 per child	Mon. <input type="checkbox"/> \$50.00 per child <i>Field Trip!</i>	Tues. <input type="checkbox"/> \$50.00 per child <i>Field Trip!</i>	Weds. <input type="checkbox"/> \$50.00 per child <i>Field Trip!</i>		_____ AM	_____ PM

TUITION AGREEMENT

- There are two payment options for weekly summer camp tuition after the initial registration fee and tuition deposit are made:
 1. Pay in full at the time of registration for all summer camp tuition; or
 2. Pay weekly summer camp tuition (charged every Friday) through your designated Tuition Express account. Please clearly identify your credit card or bank account number on the attached Tuition Express form.
- All Nashua Adult Learning Center accounts must be current in order to enroll your child in summer camp.
- A \$35.00 non-refundable registration fee per child and two week tuition deposit is required with your application at the time of registration.
- Tuition deposit refunds (minus the registration fee) are issued **only if you cancel on or before June 3, 2019. After June 3, 2019, all initial tuition deposits are non-refundable.**
- Tuition payments are automatically withdrawn from your designated Tuition Express bank or credit card account each Friday, and account statements are mailed weekly.
- Should your payment information change for any reason, you must update the Billing Office of the Nashua Adult Learning Center with the new information prior to your child(ren) attending camp.
- Should your weekly payment decline for any reason, an alternate successful payment must be provided to the Nashua Adult Learning Center Billing Office prior to your child(ren) attending camp.
- You are required to pay the full tuition for any and all days you register your child(ren) for summer camp as reflected under "SCHEDULE" of this application. That tuition will be charged to your Tuition Express account, regardless of whether or not your child is in attendance at camp.
- A \$15.00 insufficient funds fee will be applied to your account for any and all returned payments.
- Our program closes at 6:00 PM. A late fee of \$1.00 per minute will be charged to your account for any pick-ups after 6:00 PM. Repeated late pick-ups may result in disenrollment from our program.
- If you receive reduced rates through the NH Department of Health and Human Services (NH DHHS) and a change to your determination or eligibility is made, you must notify our office immediately. Any charges not covered by NH DHHS are your responsibility and must be paid accordingly.
- Nashua Adult Learning Center reserves the right to dis-enroll your child from our program for non-payment of fees, repeated late pickups or child or parent behavior that causes a safety concern or disruption of the program.
- Questions on your billing account? Contact Jillian Link at 882-9080 x 2214.

I _____ have read the above Tuition Agreement and understand it is my responsibility to comply with the items listed above. I further understand and agree that in signing this Tuition Agreement, I am personally liable for full tuition payment for any and all days I registered my child(ren) for summer camp as reflected under "SCHEDULE" of this application and grant permission to the Nashua Adult Learning Center to charge my designated Tuition Express account for that tuition, regardless of whether or not my child(ren) attends summer camp.

Parent/Guardian Signature

Date

GROUP 2 Camper's name: _____

Non-Breakfast Option: 7:15 AM – 6:00 PM

Cost: \$ 235.00 per week for the first child (Monday-Friday)** *Weeks 1 & 2: full time pro-rated due to shortened camp week*
 \$ 199.75 per week for the second child (Monday-Friday)**
 \$ 48.00 per day / per child for part-time-
 (* There are no sibling discounts for part-time / ** \$10.00 per child additional fee for Canobie Lake trip on August 13, 2019.)

(Please use a separate form for each child)

Child's Name: _____ Sex: M ___ F ___ D.O.B: ___/___/___
 School: _____ Grade in Sept 2019: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Parent Name: _____ Daytime Phone: (____) _____ - _____
 Email: _____

T-shirt & tank top size: (check one)	6-8 <input type="checkbox"/>	10-12 <input type="checkbox"/>	14-16 <input type="checkbox"/>	Adult S <input type="checkbox"/>	Adult M <input type="checkbox"/>	Adult L <input type="checkbox"/>
Would you like extra shirts?	<input type="checkbox"/> Extra T-Shirt (\$10.00 each)			<input type="checkbox"/> Extra Tank Top (\$10.00 each)		

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Camp Week	Full Time? <i>Monday-Friday</i>	Part-Time? <i>Please check all days that apply</i>				Estimated	
						Drop off time?	Pick up time?
6/26/19- 6/28/19 <i>Camp starts 6/26</i>	Weds - Friday* <input type="checkbox"/> \$141.00 / 1 st child \$119.85/2 nd child		Weds. <input type="checkbox"/> \$48.00 per child	Thurs. <input type="checkbox"/> \$48.00 per child	Fri. <input type="checkbox"/> \$48.00 per child	_____ AM	_____ PM
7/01/19-7/05/19 <i>Closed July 4th</i>	Mon/Tues/Weds/Fri <input type="checkbox"/> \$188.00 / 1 st child \$159.80/ 2 nd child	Mon. <input type="checkbox"/> \$48.00 per child	Weds. <input type="checkbox"/> \$48.00 per child		Fri. <input type="checkbox"/> \$48.00 per child	_____ AM	_____ PM
7/08/19-7/12/19	Monday-Friday <input type="checkbox"/> \$235.00 / 1 st child \$199.75/ 2 nd child	Mon. <input type="checkbox"/> \$48.00 per child	Weds. <input type="checkbox"/> \$48.00 per child	Thurs. <input type="checkbox"/> \$48.00 per child	Fri. <input type="checkbox"/> \$48.00 per child	_____ AM	_____ PM
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8/12/19-8/16/19 <i>\$10/extra Canobie</i>	Monday-Friday <input type="checkbox"/> \$245.00 / 1 st child \$209.75/ 2 nd child	Mon. <input type="checkbox"/> \$48.00 per child	Weds. <input type="checkbox"/> \$48.00 per child	Thurs. <input type="checkbox"/> \$48.00 per child	Fri. <input type="checkbox"/> \$48.00 per child	_____ AM	_____ PM
8/19/19-8/21/19 <i>Field trip week! Last day 8/21/19</i>	Mon – Weds* <input type="checkbox"/> \$144.00 per child	Mon. <input type="checkbox"/> \$48.00 per child <i>Field Trip!</i>	Tues. <input type="checkbox"/> \$48.00 per child <i>Field Trip!</i>	Weds. <input type="checkbox"/> \$48.00 per child <i>Field Trip!</i>		_____ AM	_____ PM

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- Questions on your billing account? Contact Jillian Link at 882-9080 x 2214.

I _____ have read the above Tuition Agreement and understand it is my responsibility to comply with the items listed above. I further understand and agree that in signing this Tuition Agreement, I am personally liable for full tuition payment for any and all days I registered my child(ren) for summer camp as reflected under "SCHEDULE" of this application and grant permission to the Nashua Adult Learning Center to charge my designated Tuition Express account for that tuition, regardless of whether or not my child(ren) attends summer camp.

Parent/Guardian Signature

Date



Automated Payment Processing Safe – Convenient – Easy

We are excited to offer the safety, convenience and ease of Tuition Express® — a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR **BANK ACCOUNT** and **CREDIT CARD**

I (we) hereby authorize (business name) Nashua Adult Learning Center to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. _____ (initial) Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

COMPLETE ONE SECTION ONLY

I authorize the automatic withdrawal of initial camp registration fee plus two week tuition deposit in the total amount of \$_____. I also authorize the automatic withdrawal of my weekly camp payments every Friday as indicated on my confirmation sheet.

SECTION A (Credit Card)

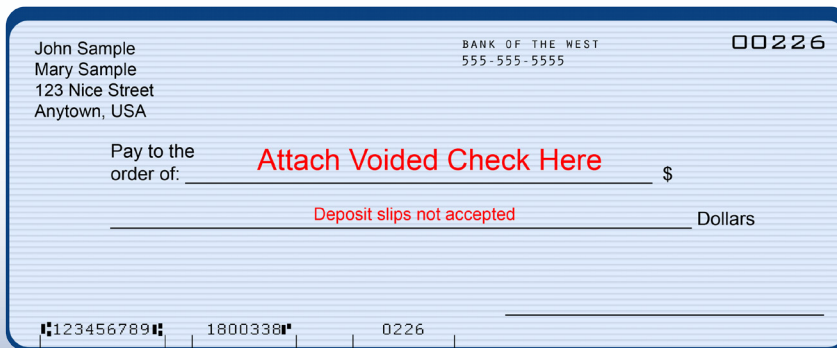
_____		_____	
Cardholder Name		Phone #	
_____		_____	_____
Cardholder Address		City	State Zip
_____		_____	
Account Number		Expiration Date	
_____		_____	
Cardholder Signature		Date	

SECTION B (Bank Account)

_____		_____	
Your Name		Phone #	
_____		_____	_____
Address		City	State Zip
_____		_____	
Bank or Credit Union Name	Bank or Credit Union Address	City	State Zip
_____		_____	
Routing Transit Number (see sample below)	Account Number (see sample below)	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
_____		_____	
Authorized Signature		Date	

For Official Use Only

Date Received
Employee Signature



A service of

