

Camper's Name (Last, First)	Grade in 17-18	Mailing Address

Child's Chinese experience: None Some Chinese Language Speaks Chinese at home

Does the camper attend a Chinese Immersion School? YES (# of years _____), NO

Parent/Guardian 1: _____ PH# _____

Email Address: _____

Parent/Guardian 2: _____ PH# _____

Email Address: _____

2017 SUMMER CAMP HEALTH FORM: Please complete the online Google document. This form must be completed for each camper.

<http://bit.ly/2mtiQTW>

I have completed the online mandatory 2017 Summer Camp Health Form for each camper.

AFTERCARE SIGN UP:

Aftercare is available from 12:00-6:00 pm. Cost per day is \$30.

	Monday	Tuesday	Wednesday	Thursday	Friday
Please check the day(s) your child will attend	July 24	July 25	July 26	July 27	July 28
	July 31	August 1	August 2	August 3	August 4

PAYMENT OPTIONS: please select your payment preference

<input type="checkbox"/>	Check : Please make your check payable to Yinghua Academy, mail or drop off at the main office.
<input type="checkbox"/>	Credit Card: A 2% processing fee will apply.
<input type="checkbox"/>	ACH (Automated Clearing House)- An existing ACH account must be in place to use this option.

PAYMENT INFORMATION:

<p>Please circle: <i>First Child</i> or <i>Sibling</i></p> <p>Early Bird Enrollment by 4/21/17 \$425 _____</p> <ul style="list-style-type: none"> • Enrollment after 4/21/17 \$475 _____ • Sibling 20% Discount applies - _____ • Aftercare \$30 X _____ # day (s) = + _____ <p style="text-align: right;">Total Due: _____</p>	<p>Payment Type: Check ___ Credit Card___ ACH ___</p> <p>Name on Credit Card</p> <p>(circle one) Visa or MasterCard</p> <p>Card #</p> <p>Exp. Date: Security Code:</p> <p>Amount to be charged:</p>
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For more information call (612)788-9095 ext.160 or email susan.reader@yinghuaacademy.org