

# LLCDC Summer Escapades (Camp) Registration

Parent/Guardian Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Email address \_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_  
Additional person LLCDC is authorized to discuss this account with:  
Name \_\_\_\_\_  
Relationship \_\_\_\_\_ Phone \_\_\_\_\_  
Email address \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Child's Name: \_\_\_\_\_  
DOB: \_\_\_\_\_ Grade entering Fall: \_\_\_\_\_  
T-Shirt Size (Circle One): Youth- S M L Adult- S M L XL  
Are you a School Year 2021-2022 LLCDC Family: (circle one) Yes No  
If yes, please indicate LLCDC Center your child attends: \_\_\_\_\_  
School Your Child Attends: \_\_\_\_\_

## Please Complete a Separate Registration Form for Each Child.

Name of Sibling(s): \_\_\_\_\_

How did you hear about us?

Advertisement  Your School  Billboard  Mailed Brochure  Referred By: \_\_\_\_\_ Other: \_\_\_\_\_

## Parent/Guardian Agreement

By signing this registration agreement on behalf of my child, I acknowledge I am financially responsible for the weeks indicated on the registration form. In case of voluntary withdrawal, absenteeism, deduction of weeks or if my child is removed from camps, I understand there will be **no refund of camp fees** or credit applied to my account. I agree to complete all required forms and submit forms two weeks prior to the start of the camp week. I agree to read the 2022 Summer Escapades (Camp) Parent manual in its entirety and to abide by the requirements and policies as stated for camp and for COVID-19 regulations for childcare (MASK are required for ages 2 and up).

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

\_\_\_\_\_  
Date

## Emergency Form, Medical Information & Activities

I acknowledge my child's emergency form, medication information and any additional mandatory camp enrollment forms must be submitted to the Camp Director prior to starting at camp. If forms are not current and/or not on file, my child will not be permitted to begin camp. I acknowledge water parks may be visited this summer. I acknowledge that water play pool occurs during summer camp. I acknowledge that bicycle riding may occur at camp or on field trips.

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

\_\_\_\_\_  
Date

## Tuition Responsibilities

**Enrollment: A completed LLCDC Summer Camp form and \$30 non-refundable registration fee and deposit equal to your last week of summer day camp (currently \$145/week) should accompany the SUMMER CAMP ENROLLMENT FORM for children not currently enrolled in the LLCDC, deposit of \$30 per week (7 or more weeks) including specific choice of weeks, must be in our LLCDC office by June 10, 2022. Walk in rates apply if registering and/or paying less than 1 week prior to start of camp (additional fee of \$40 per week) or less than 1 week prior to camp (additional fee of \$50 per week). Security deposits are required with all types of registration (unless registering less than 2 weeks prior to start of camp week; then registration, tuition and walk-in fee are due at time of registration).**

**FAX BACK TO: 410.874.0977 OR E-MAIL TO INFO@LEARNINGLADDERSINC.ORG**

Return completed registration form and fee to: Learning Ladders, Inc. • 270 Bugeye Sq., Unit 1 • Prince Frederick, MD 20678 • 443.968.9452 • [www.learningladdersinc.org](http://www.learningladdersinc.org)

# LLCDC Summer Escapades (Camp) Registration

Child's Name: \_\_\_\_\_

## PAYMENT INFORMATION

*All families must provide credit card information, regardless of the payment option chosen or must set up payments in Brightwheel.*

Please select:

- I \_\_\_\_\_ (full name) will pay Cash, Brightwheel or CashApp.  
 I \_\_\_\_\_ (full name) authorize Learning Ladders, Inc. to charge my credit card indicated below **7 banking days prior to payment due date** for the payment of my summer camp tuition.

Billing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone# \_\_\_\_\_

Email \_\_\_\_\_

## PARENT/GUARDIAN AGREEMENT

By signing this registration agreement on behalf of my child, I acknowledge that if tuition is not paid by the due date LLCDC has permission to process the amount due either by credit card (including 3% fee) or ACH withdrawal using the information provided or a late fee of 10% per day will be charged and added.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

This authorization will remain in effect until the end of the summer—August 26, 2022. I agree to notify LLL, Inc. in writing of any changes in my account information or termination of this authorization at least 10 days prior to the next billing date. If the above noted payment falls on a weekend or holiday, I understand my payments will be executed on the prior banking day. Credit card fee of 2.6% (Brightwheel) will be applied. I certify that I am an authorized user of this credit card and will not dispute these scheduled transactions with my bank or credit card company as long as the transactions correspond to the terms indicated in this form.

**CHECKS WILL NOT BE ACCEPTED FOR TUITION OR FIELD TRIPS FOR THE SUMMER ESCAPADES PROGRAM**

Visa  Mastercard

Cardholder Name \_\_\_\_\_

Account Number \_\_\_\_\_

Exp. Date \_\_\_\_\_

CVV \_\_\_\_\_

(3-digit number on back of card)



## CHOOSE YOUR WEEKS ON NEXT PAGE

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# LLCDC Summer Escapades (Camp) Registration

Child's Name: \_\_\_\_\_

**\*\* Note:** Dependent on Calvert County Public Schools final day of school, the June 13-17 week of camp may be adjusted and/or revised

Please circle the weeks for your child attendance schedule. Circle days attending the field trip for that week	June 13-17 NO SE Camp	June 20-24	June 27-July 1	July 4-8	July 11-15	July 18-22	July 25-29	Aug 1-5	Aug 8-12	Aug 15-19	Aug 22-26
Circle FT for attending Field Trip this week	NA	FT	FT	FT	FT	FT	FT	FT	FT	FT	N/A
Circle days attending Field Trip or Event for that week	N/A	M T W Th F	M T W F	M T W Th F	M T W Th F	M T W Th F	M T W Th F	M T W Th	M T W Th F	N/A	N/A
<b>Pump It Up</b> 109 Post Office Rd, Ste B, Waldorf, MD Departs 9:00 AM – 1:00 PM	N/A	TBD	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Lord Calvert Bowling Center</b> 2275 Solomons Island Rd, Huntingtown Departs 09:30 AM and Returns: 1:00 PM	N/A	N/A	N/A	Closed 7/4 TBD	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Flagship Premium Cinemas Calvert Village</b> Departs 12:00 PM and Returns 3:00 PM	N/A	N/A	N/A	N/A	N/A	TBD	N/A	N/A	N/A	N/A	N/A
<b>Skate Zone</b> 1082 Rt. 3 South, Crofton, MD 21114 Departs 12:00 PM – 4:00 PM	N/A	N/A	TBD		N/A	N/A		N/A	N/A	NA	N?A
<b>Historic ST. Mary's City</b> Departs 09:00 AM and Returns 1:00 PM	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	TBD	N/A	N/A
<b>Jump Bunch (TBD)</b> School Age: 2:30 - 3:00 PM & Preschool 3:00 – 3:30 PM	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>ST. Mary's Science Center</b> Departs 09:00 AM and Returns 1:00 PM	N/A	N/A	N/A	N/A	TBD	N/A	N/A	N/A	N/A	N/A	N/A
<b>ARTful Playhouse</b> Departs 09:00 AM and Returns 1:00 PM	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	TBD	N/A
<b>Hallowing Point Park (Outdoor Park)</b> 4755 Hallowing Point Rd, Prince Frederick, MD Departs 08:30 AM and Returns 1:00 PM	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	08/19/22	N/A
<b>Cove Point Water Park (TBD)</b> Lusby, MD Departs 10:30 AM and Returns 2:30 PM							TBD				
<b>Calvert County Library</b> Prince Frederick, MD Departs 8:30 AM and Returns 1:00 PM								TBD			

# LLCDC Summer Escapades (Camp) Registration

Child's Name: \_\_\_\_\_

## ORDERFORM

— Items will be made available to camper upon first week of attendance.  
*Limited quantities for all items.*

### FOR OFFICE USE ONLY

\_\_\_\_/\_\_\_\_/\_\_\_\_ (Order Received)

\_\_\_\_/\_\_\_\_/\_\_\_\_ (Items Sent)

Payment Received

\_\_\_\_ (Initials)



(Carolina Blue)



(Various Colors)

Additional LLCDC T-Shirt  
 \_\_\_\_\_ \$25.00

(Circle) Youth: S M L

Adult: S M L XL

Quantity \_\_\_\_\_

LLCDC Water Bottle \_\_\_\_\_ \$10

Quantity \_\_\_\_\_

## Other Accessories:



(Various Colors)

Drawstring Bag \_\_\_\_\_ \$7

Quantity \_\_\_\_\_



(Various Colors & Styles)

Cooling Bandanna \_\_\_\_\_ \$5

Quantity \_\_\_\_\_

Total Cost of Items Selected \$ \_\_\_\_\_

(Payment due at the time of order)

Check Attached

Use Payment Info Provided on Pg. 2

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

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