

Winter Wonderland Half-Day Conference Camps Registration Form Recker Campus

Family's Last Name: _____

Student Name: _____

Grade: _____

Student Name: _____

Grade: _____

Student Name: _____

Grade: _____

Student Name: _____

Grade: _____

Choose the Days Your Child(ren) Will Attend:

- ☐ Wednesday, January 9th, 2019 – 11:40 to 4:00 PM (Cost: \$40, 10% discount for two or more children)
- ☐ Thursday, January 10th, 2019 – 11:40 to 4:00 PM (Cost: \$40, 10% discount for two or more children)
- ☐ Friday, January 11th, 2019 - 11:45 to 4:00 PM (Cost: \$40, 10% discount for two or more children)

Parent Contact Information:

Parent Name: _____

Emergency Phone Number: _____

Parent Name: _____

Emergency Phone Number: _____

Cost:

of Children Attending: _____ x \$40.00 x _____ # of days

Subtotal: _____

10% discount for two or more children (not employees)

Subtract 10%: _____

Other

Other: _____

TOTAL: _____

Payment:

Credit Card Order: _____

Exp. Date: _____ CVC: _____

Cash: _____ Check # Order: _____

Make checks payable to San Tan Charter School, Write Recker Conference Camp in the memo.



SAN TAN CHARTER SCHOOL