



MAULDIN CHRISTIAN ACADEMY
2021 SUMMER CAMP REGISTRATION FORM

Accounts must be current to enroll in Summer Camp

Rising 1st – 6th Graders

Today's Date _____

Child's Name: _____ Date of Birth: _____

Parent(s) Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Phone: (H) _____ (W) _____ (C) _____

Boy _____ Girl _____ Grade completed as of June 2021: _____

Is child presently enrolled in MCA Afterschool or Elementary? _____ Yes _____ No

Please check all of the weeks you are registering your child:

_____ June 7-11	_____ July 12-16
_____ June 14-18	_____ July 19-23
_____ June 21-25	_____ July 26-30
_____ June 28-July 2	_____ August 2-6
_____ July 6-9	_____ August 9-13

<u>Office Use Only</u>
Reg Fee? ___ Yes ___ No
Activity Fee _____
Deposit Due _____
Total AMT Due _____
Draft __ Cash __ CK# _____
Employee Initials _____

T-shirt Size: YXS YS YM YL AS AM AL AXL

FEE AGREEMENT:

- Registration fee: \$25 Non-MCA attendees, only
- Activity fee: \$60 due at registration for all students
 - Attending 5 weeks or less activity fee is \$50
- Deposit: \$10 for **each week** your child is registered/due at registration
- ***All fees and deposits are non-refundable. Cancellation deadline for weeks attending is May 28, 2021. Cancellations after May 28th will incur a \$70 cancellation fee.***
- Weekly fee: \$140
- Weekly draft: \$130 (***\$140 fee minus \$10 deposit***) will be drafted each Friday in attendance

I have read and agree with the terms of this fee agreement.

Signature: _____

Date: _____

Name of Parent/Guardian: _____

Summer Camp Students Only

ACH (Auto Draft) Agreement

****REGISTRATION CANNOT BE ACCEPTED IF YOU HAVE A PAST DUE BALANCE**
FRONT AND BACK MUST BE COMPLETED BY ALL FAMILIES TO REGISTER YOUR CHILD**

Name of Child/Children:

Grade Completed

1) _____
2) _____
3) _____

My child(ren) will participate in Summer Camp 2021

My family will have a Multi Child Discount

Summer Camp has **one draft cycle**. Your account will be drafted each Friday your child(ren) attends.

Summer Camp Fee

_____ Weekly- Friday

\$ _____

I (we) hereby authorize Mauldin Christian Academy, to initiate debit entries to my (our) account indicated below. I understand there will be a \$30 fee for insufficient funds. ***Any changes must be made 7 business days prior to the scheduled draft.***

Payment Options:

_____ **We are a current family and will use the account that is on file.**

_____ **Please use the checking/savings account below.**

Account Holder Name: _____

Routing number: _____

Account number: _____ Checking Account Savings
Account

_____ **Please use the debit/credit card below (Visa/MasterCard).**

Account Holder Name: _____

Card Number _____

Expiration Date _____ Security Code (three digits on back of card) _____

Signature _____

Date _____

Return form with fees.