



RecPlex Summer Camp 2021 Payment Form /Automatic Payment Options

Office Use Only

Paper Scanned ☐

Child Full Name: _____ Start Date: _____

Circle Age Group: Trailblazers Tykes Juniors Seniors

Child Full Name: _____ Start Date: _____

Circle Age Group: Trailblazers Tykes Juniors Seniors

Child Full Name: _____ Start Date: _____

Circle Age Group: Trailblazers Tykes Juniors Seniors

*** RecPlex Summer Camp calendars must be submitted for each child in order to start the summer camp program. The exclusion of calendars will result in inability to enroll in summer camp.

***If you would like to add-on additional field trips /specialty camps or a change occurs to your child's schedule, please email Jackie Hill (jhil@pleasantprairiewi.gov) two weeks prior to the week of care to allow your account to be charged accordingly.

Parent/Guardian Name: _____

Email Address: _____

Please select one of the options below. (Restrictions apply to each option. If your child receives a camp lunch it will be added to your weekly billing.)

Option 1: (only available to current child care participants) Continue using child care payment authorization information currently on file ☐

Option 2: Automatic Check Withdrawal Weekly ☐

Checking Account Information: Attach a voided check to this form

Account number: _____

Routing number: _____

Bank Name: _____

Option 3: Payment by Automatic Credit/Debit Card Weekly (Enter Card Information and sign below) ☐

Card Type: Please circle one VISA MASTERCARD DISCOVER

Cardholders Name (print): _____

C.C. Financial Institution (bank name on credit card): _____

Credit Card #: _____

Expiration Date: _____

Billing Address: _____

I hereby authorize the RecPlex and the financial institution designated above to begin automatic deductions from the account designated above for all Summer Camp participants listed on this form. I understand my checking account or credit card will be charged weekly. I understand that my monthly checking account or credit card statement will typically show the amount and the date payment was made to the RecPlex. I understand that I am responsible for ensuring that the account designated above has sufficient funds on a weekly basis to allow for the automatic deduction of my payment. I understand that if there are any changes to my account I will notify the Youth Services Supervisor in writing 2 weeks prior to my scheduled weekly automatic payment deduction. I understand I am liable for any uncollected payment and for any fees or penalties imposed by the RecPlex or my financial institution related to any uncollected payment.

I am the parent/guardian and agree to the terms of this document.

Account Holder Signature _____ Date _____



RecPlex Summer Camp 2021 Payment Form /Automatic Payment Options

Office Use Only

Paper Scanned ☐

Fees: **M- Member of RecPlex / NM- Non Member of RecPlex

Trailblazer I –Tyke II age group (annual registration fee of \$25-\$80 per child)

Full Days: 4 to 5 days a week \$184 M/ \$226 NM 3 days a week \$142 M/ \$174 NM 1 to 2 days a week \$95 M/ \$116 NM

Half Days: 4 to 5 days a week \$116 M/ \$147 NM 3 days a week \$90 M/ \$114 NM 1 to 2 days a week \$60 M/ \$76 NM

Junior I –Senior II age group (annual registration fee of \$25-\$80 per child)

Full Days: 4 to 5 days a week \$180 M/ \$222 NM 3 days a week \$140 M/ \$170 NM 1 to 2 days a week \$93 M/ \$114 NM

Half Days: 4 to 5 days a week \$114 M/ \$145 NM 3 days a week \$87 M/ \$111 NM 1 to 2 days a week \$58 M/ \$74 NM

***If child will be attending summer school, please contact Jackie Hill at jhill@pleasantprairiewi.gov for availability of transportation, pricing and scheduling details*

Child's Summer Schedule: Please note this section is to give us an idea of your child's schedule for the summer. Monthly calendars will be emailed out at a later date for families to mark any day's off/special schedules your child will have throughout the summer along with field trips and specialty camps.

****Check the box for which care option your child will use for most weeks they will be attending summer camp**

Name of Child: _____

☐ 4-5 days of full day care

- ** initial here _____ if your child will be attending half day weekly

☐ 3 days of care: circle which days of care you child will attend: Monday Tuesday Wednesday Thursday Friday

- ** initial here _____ if your child will be attending 3 half days

☐ 1-2 days of care: circle which days of care your child will attend: Monday Tuesday Wednesday Thursday Friday

- ** initial here _____ if your child will be attending 1-2 half days

Name of Child: _____

☐ 4-5 days of full day care

- ** initial here _____ if your child will be attending half day weekly

☐ 3 days of care: circle which days of care you child will attend: Monday Tuesday Wednesday Thursday Friday

- ** initial here _____ if your child will be attending 3 half days

☐ 1-2 days of care: circle which days of care your child will attend: Monday Tuesday Wednesday Thursday Friday

- ** initial here _____ if your child will be attending 1-2 half days

Name of Child: _____

☐ 4-5 days of full day care

- ** initial here _____ if your child will be attending half day weekly

☐ 3 days of care: circle which days of care you child will attend: Monday Tuesday Wednesday Thursday Friday

- ** initial here _____ if your child will be attending 3 half days

☐ 1-2 days of care: circle which days of care your child will attend: Monday Tuesday Wednesday Thursday Friday

- ** initial here _____ if your child will be attending 1-2 half days



RecPlex Summer Camp 2021 Payment Form /Automatic Payment Options

Office Use Only

Paper Scanned ☐

Registration Agreement

I agree to the policies and procedures set forth in the RecPlex Summer Camp Policies and acknowledge that my child is self-sufficient with regard to toileting, eating and dressing. My child and I have discussed and understand that while participating at RecPlex programs, the staff is in charge. My child is aware that any rules and/or instructions made by a staff member are to be followed. I accept the RecPlex Summer Camp behavior policy. I give permission for my child to ride to and from RecPlex in buses and company vehicles. RecPlex also has my permission take my child on field trips. I agree to provide a booster seat for my child if necessary. I will be notified in advance when any field trips take place. RecPlex has my permission to use any photographs of my child taken during the program or during any activity the program sponsors for the purpose of display or publicity.

____ **Agreement:** I understand this registration form is a contract for child care on specific days and weeks and that I am liable for the cost regardless of whether or not my child attends. I agree to pay RecPlex my weekly tuition in advance. I understand that there is no credit or refund given for absences, vacations or holidays. Further, I am responsible for payment of all days and weeks that I have indicated or added. Two (2) week's advance notice is required in writing to change my child's schedule or withdraw from the program. I understand I am liable for these charges if two weeks' notice is not given for any changes in scheduled attendance or withdrawal from the program.

____ **Payment:** Payments are due no later than the Friday prior to the week of care. I (parent or guardian who signs form) agree to make payments to Village of Pleasant Prairie/RecPlex no later than the due date or pay an additional \$20 late fee per participant. Returned checks or declined credit card payments will incur a \$25 fee, plus you will be required to make payment in full for past due amounts in addition to one week's tuition in advance before readmitting your child to the program.

By completing and signing the Registration form, I (parent or guardian) understand and agree to the terms, policies and guidelines set forth in the RecPlex Summer Camp Policies flyer and Registration form. I agree to be responsible for all costs incurred with collecting debts more than 30 days past due, including but not limited to, fees for late payments, uncollected payments, filing fees, court costs, and attorney's fees.

By signing below you understand and agree to Village of Pleasant Prairie/RecPlex payment terms and authorize Village of Pleasant Prairie/RecPlex to process your payments weekly prior to your child's participation in the program. Village of Pleasant Prairie/RecPlex will securely maintain your financial information. Parents/Guardians are responsible for updating with RecPlex any changes to your payment information, including credit card number; expiration date, credit card verification number, checking account information, and billing address changes.

Check Here: ☐ I have read and agree to Summer Camp Policies and Registration Form.

Print Name: _____

Legal Guardian Signature: _____ Date: _____