

Child & Family Institute Summer in the Meadow Camp 2010 Registration Form

Sign up for one week or for all five weeks. Each week has a different theme.

Family Name:		Home Phone:	
Mom's Name:		Dad's Name:	

Sessions

Week 1 - June 22-24

Week 3 - July 6-8

Week 5 - July 20-22

Week 2 - June 29-July 1

Week 4 - July 13-15

Session(s)	Child's Name	Birth Date

Time 9:00 to 12:00

3 year olds meet in the Meadow/Hearth Rooms

4-5 year olds meet upstairs in Trinity Preschool Room

5-6 year olds meet in Angus Hall

Cost: \$120 per week/session

_____ X \$100 non-refundable deposit = \$ _____
of children *Total Deposit*

Are you....? (Please circle all that apply)

*Presently
enrolled*

Sibling

*Meadow
Maker*

Alum

*Brand new to
CFI*

Please make checks payable to the Child & Family Institute.

330 Ravenswood Avenue, Menlo Park, CA 94025

Scholarships are available upon request. Please contact Debbie or Kris at 650- 328-2262

Office use: Date Received w/ Deposit _____

