



2025 Summer Camp Application

Please return this application by May 23rd along with the \$55 non-refundable registration fee. Registration fee includes 5 Camp T-Shirts, Curriculum Book, and Supplies. Student slots will be secured when applications AND fees are submitted.

Child's First and Last Name _____ Date: _____

Date of Birth _____ Grade Entering in Fall _____

T-Shirt Size (See sizing details on back) ☐ XS (6-8) ☐ S (10-12) ☐ M (14-16) ☐ L (18-20) ☐ XL (22-24)

This year, ZBOP's summer camp will run for 10 weeks, beginning June 9th and ending August 15th. Students will review curriculum to prepare them for the upcoming school year. They will also participate in weekly field trips, music lessons, arts & crafts, indoor/outdoor play and more. Meals will be provided; no outside food will be allowed. Below are the summer camp fees. Calculate total summer camp fees in the space provided to the right.

Summer Camp (8:30 a.m. – 2:30 p.m.) = \$1,250 \$ _____

Before Care (6:00 a.m. – 8:30 a.m.) = \$200 + \$ _____

After Care (2:30 p.m. – 5:00 p.m.) = \$200 + \$ _____

Total Camp Fees: = \$ _____

Initials I understand that I am contracting to reserve a class slot, and fees are due **whether my child attends or not**. I understand that tuition credit will NOT be given for unscheduled absences, scheduled absences, vacation periods or holidays.

Choose the option below that applies to you:

- My tuition **IS NOT/WILL NOT BE** state subsidized. I will make three payments equal to one-third of the total camp fee by: June 9th, July 1st, and July 28th. I understand my child will not be allowed attendance if any payment is missed.
- My payment **IS** state subsidized. I will pay my co-payment amount the first business day of each month.
- My payment **WILL BE** state subsidized. I will pay camp tuition weekly until the state notifies me of my co-payment amount. I understand ZBOP will return my advance payments to me minus all co-payment obligations that are determined by the state.

Drop off time is: _____ and Pick up time is: _____.

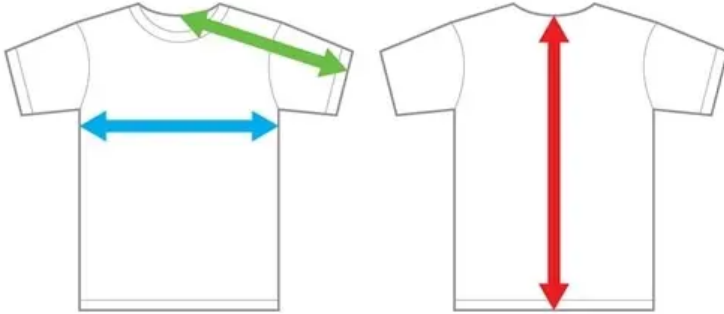
I (We), the undersigned, have read and do agree to abide by the terms, conditions, and procedures outlined in the Zion Buds of Promise Christian Academy handbook.

Printed Name Signature Date

Printed Name Signature Date

T-SHIRT SIZING DETAILS

How to Measure



BODY LENGTH

Lay garment flat (face down). Measure from center back neckline seam straight down to bottom of the front hem.

BODY WIDTH

Lay garment flat. 1" below the armhole flat measure the garment across the chest.

SLEEVE LENGTH

Lay garment flat (face down). Measure from center back neck to outer edge of shoulder seam, then along outer edge to sleeve end.

Youth	Length	Width	Sleeve
YXS	19.5	15.5	7.25
YS	21.5	17	7.5
YM	23	18	7.75
YL	25	19	8
YXL	26.5	20	8.25

*All measurements in the sizing table are in inches