



Summer 2014 Registration: Summer Sizzles @ SPX!

Please note that the registration form has changed. Print clearly. All registrations are on a first-come, first-registered basis. Space in each module is limited and students will receive confirmation of their enrichment programs prior to June 16. This confirmation will also include full camp details. No refunds can be made once a student is accepted into a module and no deductions will be made for late arrivals, early departures, withdrawal, or absences due to illness or vacation; so, please make your selections carefully.

If a family registers for more than three summer enrichment sessions, they can take advantage of a 10% family discount. Please apply that discount prior to remitting payment.

Please make checks payable to the St. Pius X and return with registration forms to Summer Enrichment, c/o the school office or via mail to "St. Pius Summer Enrichment," 204 S. Lawrence Road, Broomall, PA 19008, as soon as possible. Direct questions to summer@spxbroomall.org.

Family Name: _____ Parent/Guardian Names: _____

Address: _____

Parent Phone Numbers during Camp Hours: _____ Contact Email: _____

Emergency Contact Name and Phone Number: _____

I hereby authorize the staff of St. Pius Summer Enrichment to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive and release the Enrichment Program from any and all liability for any injuries or illness incurred while at the enrichment sessions. I have no knowledge of any physical impairment that would be affected by my child/ren's participation in the program, as outlined in the enrichment session description materials. I also understand the Enrichment program retains the right to use for publicity and advertising purposes, photographs and video of the participants taken during the Enrichment sessions. I also understand that the Enrichment staff reserve the right to dismiss any participant whose conduct is detrimental to the program and no refund will be issued.

Parent Signature: _____ Date: _____

Please use the reverse side of this form to register additional children.

Child's Name: _____ Birthdate: _____ Grade for 2014-15 school year: _____

Special Notes (allergies, restrictions, etc.): _____

Program Registration:

Program Name: _____ Week: _____ AM session Lunch PM session Cost: _____

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Program Name: _____ Week: _____ AM session Lunch PM session Cost: _____

Total: _____

Please note that every effort will be made to accommodate requested enrichment programs. You will be contacted if a program is filled and given the chance to choose another program or week. If not, your registration will be refunded.

Please use a separate section to register each child.



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Child's Name: _____ **Birthdate:** _____ **Grade for 2014-15 school year:** _____

Special Notes (allergies, restrictions, etc.): _____

Program Registration:

Program Name: _____ Week: _____ AM session Lunch PM session Cost: _____

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Program Name: _____ Week: _____ AM session Lunch PM session Cost: _____

Total: _____

Child's Name: _____ **Birthdate:** _____ **Grade for 2014-15 school year:** _____

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Total: _____