



Enrollment Form

1819 east 15th street
tulsa, ok 74104
918-584-2779

HCA USE ONLY RECEIVED _____

ENROLLMENT _____

Child's Name _____ Date of Birth _____ Sex _____
Address _____ City, State, Zip _____
Home Phone _____ Home E-mail _____
With whom does child reside? _____

Father's Name _____
Home Address _____
City, State, Zip _____
Home Phone _____
Cellular Phone _____
Pager _____
Home E-mail _____
Name of Employer _____
Title/Occupation _____
Work Telephone _____
Work E-mail _____

Mother's Name _____
Home Address _____
City, State, Zip _____
Home Phone _____
Cellular Phone _____
Pager _____
Home E-mail _____
Name of Employer _____
Title/Occupation _____
Work Telephone _____
Work E-mail _____

Stepmother's Name _____
Home Address _____
City, State, Zip _____
Home Phone _____
Cellular Phone _____
Pager _____
Home E-mail _____
Name of Employer _____
Title/Occupation _____
Work Telephone _____
Work E-mail _____

Stepfather's Name _____
Home Address _____
City, State, Zip _____
Home Phone _____
Cellular Phone _____
Pager _____
Home E-mail _____
Name of Employer _____
Title/Occupation _____
Work Telephone _____
Work E-mail _____

Full Time Care: 7:30-5:30 5 days (mtwthf) 3 days (mwf) 2 days (tth)

Siblings at Happy Campers Academy _____ age: _____
_____ age: _____
_____ age: _____

Full name of child _____

Child's Physician _____ Phone _____

Emergency Hospital Preference _____

Is your child allergic to anything that HCA needs to be aware of? _____

Any special medical condition that HCA should be aware of? _____

I authorize (name of child) _____ to participate in water activities.

Parent Signature _____ Date _____

I acknowledge that Happy Campers Academy uses video to monitor the activities of each room in its facility, and I agree to allow my child(ren) to be included in this process for the purposes of monitoring and safety.

Parent Signature _____ Date _____

Happy Campers Academy Financial Policies

A \$55 non-refundable application fee per child, as well as a \$45 supply fee will be due upon enrollment, and annually during re-enrollment in March.

Tuition is payable in advance and is on-refundable. Tuition is due on the first day of every month. A late fee of \$30 will be assessed 5 days after the due date, and there will be a \$30 charge for returned checks and declined credit cards.

For those families who wish to pay several months in advance, you will receive a full month free if you pay for a full year in advance. For paying six months in advance, you receive one half month free tuition.

Tuition will be billed and is due each month that your child is enrolled at HCA, including the thirty day period after which you have given written notice to HCA that you are withdrawing your child. We must receive a 30-day written notice.

When a child's birthday occurs, the new rate will be applied the following month. (The month after the birthday occurs.)

For parents who are late picking up their child, a late fee of a \$1 per minute will be due at the time of pick-up.

The HCA Enrollment form, Emergency Card and a current immunization record must be provided upon the first day of attendance.

Parent Signature _____ Date _____