

5 Callender Street Cambridge, MA 02139-2996 Tel: 617-547-6811 Fax: 617-864-0692 www.cambridgecc.org

**Questions?** <u>enrollment@cambridgecc.org</u> **Register Online:** <u>www.cambridgecc.org/enrollment</u>

Child's Information:							
Child's Name:	's Name:				Gender:		
Date of Birth:/	rth:/Last Grade Completed:			School:			
Referred by (optional)	<b>:</b>						
Parent/Guardian Inf	ormation:						
Parent/Guardian Name:				Relationship to Child:			
Phone:	Emaill:						
Address:							
Parent/Guardian Inf	Street		ty	State	Zip		
Parent/Guardian Name				Relations	hip to Child:		
Phone:							
Address:	Street	Ci	ty	State	Zip		
Cowemoki Summer			cy	State	216		
_	k 1 (July 2-6) □ Week 2 (July 9-13		☐ Week 3 (July 16-20)		☐ Week 4 (July 23-27)		
☐ Week 5 (July 30 – A	Aug 3)		☐ Week 7 (Aug 13-17)		☐ Week 8 (Aug 20-24)		
Days of Attendance	(Mark all the app	oly)					
☐ Everyday [	 □Monday	Tuesday	□Wed	nesday	☐Thursday	Friday	
Cowemoki Summer I	Enrichment Progra	nm Hours: 7:30AN	M – 4:30PM; E	Extended Day u	ntil 5:30pm (\$35/v	veek, \$10/day)	
	<b>Price:</b> \$185/v	veek, \$50/day (10	0% discount fo	or additional ch	nildren)		
	Full Summer D	iscount: \$1,295 (	(save \$185) if	paid in full by 5	5/1/2018		
A reservation deposit of that will be applied	•				child(ren). This is a no re a child can start th	•	
 Parent/Guardian Signa	ture			_	 Date	<i>J</i>	