



**Summer Registration Form**

Child's Name: \_\_\_\_\_ Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Medicaid #/Insurance \_\_\_\_\_

Last Grade Completed: \_\_\_\_\_ School Attended: \_\_\_\_\_ Toilet Trained: Y or N

Phone number: \_\_\_\_\_ Alternate phone number: \_\_\_\_\_

Therapies: (circle all that apply) OT PT Speech Allergies? \_\_\_\_\_

Any helpful info. about your child \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Fees**

1 week of camp= \$250 All 6 weeks \$1200 Total payment due prior to 1st day of camp.

Mail in registration & form to: Compass Academy 1215 Sturgis Road Conway, AR 72034

Make checks payable to: **COMPASS ACADEMY**

**Daily Schedule-**

**Arrival time- 8:00 AM**

**Pick up time- 2:00-2:30 PM**

**\*Campers must bring their own lunch and snacks daily.**

Students will work on team building, improving social skills, sharing compassion with others, fitness, athletics, arts, music, receive help with specific academic weaknesses, & much more.

**6 Week sessions:** (Circle all dates attending)

June 6-9  June 13-16  June 20-23  July 11-14  July 18-21  July 25-28