Bethesda Community School, Inc.

SUMMER PROGRAM 2019
ENROLLMENT FORM

Child's Name: _____

Date of Birth: _____

Address: _____

_____

Phone: _____

Please choose a Session(s) by checking applicable box and then circle the days and time you would like your child to attend:

☐   **Session # 1: June 17 – June 28, 2019**
Days: M T W TH F (please circle—minimum of 3) Time: 8-12   8-1   8-3   8-5:30 (please circle)

☐   **Session # 2: July 1 – July 12, 2019** *(Thursday, July 4th is a holiday)*
Days: M T W TH F (please circle—minimum of 3) Time: 8-12   8-1   8-3   8-5:30 (please circle)

☐   **Session # 3: July 15 – July 26, 2019**
Days: M T W TH F (please circle—minimum of 3) Time: 8-12   8-1   8-3   8-5:30 (please circle)

☐   **Session # 4: July 29 – August 9, 2019**
Days: M T W TH F (please circle—minimum of 3) Time: 8-12   8-1   8-3   8-5:30 (please circle)

☐   **Session # 5: August 12 – August 16**
Days: *M T W TH F (please circle – minimum of 3)* Time: *8-12 8-1 8-3 8-5:30 (please circle)*
             August 19 – August 22 *M T W TH (no camp 8/24) 8-12 8-1 8-3 8-5:30*

Provided the existence of available space at the time of my submission of this enrollment application, by my signature below, I am enrolling my child in the BCS Summer Program 2019 with the schedule indicated above:

Parent Signature: _____Date_____

7500 Honeywell Lane, Bethesda, Maryland 20814
301-652-0117