

Date application received: \_\_\_\_\_

Date payment received: \_\_\_\_\_

Check#: \_\_\_\_\_ C/C pymt: \_\_\_\_\_

Assessment date: \_\_\_\_\_



## Wings on Words Summer Day Camp Application Form

June 1 – June 30, 2021

This program offers an enriched, language and literacy-based experience that fosters successful communication, creative exploration, and love of reading. To enroll, children must be **3-years-old by January 1<sup>st</sup>**, and independent in the bathroom. A pre-enrollment assessment is required and included in the application fee. Early registration is encouraged as camp fills quickly.

### To apply:

- Complete the front/backside of this form and return it to:**  
Wings on Words Preschool, 202 E. Speedway, Tucson, AZ 85705 OR  
Scan and email: [info@clctucson.org](mailto:info@clctucson.org), OR Fax (520) 624-2947.
- Submit a \$75 non-refundable registration fee with the application.**
  - (waived for public servants or returning WOW students).
  - Make checks payable to: Child Language Center or pay online at [clctucson.org](http://clctucson.org) or via SmartCare if currently enrolled.
- Upon receipt of application AND registration fee, we will schedule a pre-enrollment speech-language assessment. Assessment fee is an additional \$95 for newly enrolled (if needed).**
- Enrollment occurs on a first-come, first-served basis.**

### Day Camp Enrollment Options:

Camp Options:	Program Fee (for 4 week program)	Please mark (X) your choice
Full day (8:30 - 3:30) 5 days/wk	\$905	
Morning (8:30 – 12:00) 5 days/wk	\$735	
Before care (7:30 to 8:30 a.m.)	\$100	
After care (3:30 to 4:30)	\$100	
Speech-language therapy *(if provided)	\$140 (for 4 week program)	

**Limited scholarship assistance is available** based on financial need. Scholarship applications can be downloaded on our website, located at [www.clctucson.org](http://www.clctucson.org).

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Child's name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender of Child (circle): Boy / Girl Date: \_\_\_\_\_

Mother's Information

Father's Information

Name	Name
Cell Phone#	Cell Phone #
Work Phone#	Work Phone#
Home Address	Home Address
City, State, Zip	City, State, Zip
Email address	Email address

Has your child previously attended Wings on Words:

YES NO

If yes, please circle what & when previously attended:

Preschool Or Summer Camp Year attended \_\_\_\_\_

The need for speech-language therapy services will be based on assessment. Please circle your preferred day/time for pre-enrollment speech/language assessment. We will do our best to accommodate your preferences, but cannot guarantee it.

Tuesday

2 pm

3 pm

4 pm

Thursday

2 pm

3 pm

4 pm

*Thank you for choosing Wings on Words!*