

___ Kate
 ___ Enrollment
 ___ EZ Care
 ___ Janet

VAC

2013-2014 BEDFORD RECREATION KIDS' CLUB VACATION REGISTRATION

Child's Name: _____ **Grade:** _____

Parent's Name: _____ **Phone #:** _____

December Vacation	
Registration Deadline: 11/25/13 Please check off dates needed. Open 7:30 AM – 6 PM	
Closed	Monday, Dec. 23
Closed	Tuesday, Dec. 24
Closed	Wednesday, Dec. 25
	Thursday, Dec. 26
	Friday, Dec. 27
	Monday, Dec. 30
	Tuesday, Dec. 31
Closed	Wednesday, Jan. 1

February Vacation	
Registration Deadline: 1/25/14 Please check off dates needed. Open 7:30 AM – 6 PM	
Closed	Monday, Feb. 17
	Tuesday, Feb. 18
	Wednesday, Feb. 19
	Thursday, Feb. 20
	Friday, Feb. 21

April Vacation	
Registration Deadline: 3/25/14 Please check off dates needed. Open 7:30 AM – 6 PM	
Closed	Monday, Apr. 21
	Tuesday, Apr. 22
	Wednesday, Apr. 23
	Thursday, Apr. 24
	Friday, Apr. 25

- \$60 Per Day Full Vacation; \$65 Per Day Partial Vacation.
- Nonrefundable \$40 deposit for each vacation due with form.
- Due to fixed expenses, no changes or refunds can be made after the deadlines.
- KIDS' CLUB opens on a storm-by-storm basis. If there is inclement weather, parents should call KIDS' CLUB to see if the program is open. Inclement weather may cause KIDS' CLUB to close or change hours of operation.

Payments Due

December Vacation $\frac{\text{Days}}{\text{Rate}} \times \text{Rate} = \text{Total}$ $\frac{\text{\$40}}{\text{Deposit due with form}} = \text{Balance due 11/25/13}$

February Vacation $\frac{\text{Days}}{\text{Rate}} \times \text{Rate} = \text{Total}$ $\frac{\text{\$40}}{\text{Deposit due with form}} = \text{Balance due 1/25/14}$

April Vacation $\frac{\text{Days}}{\text{Rate}} \times \text{Rate} = \text{Total}$ $\frac{\text{\$40}}{\text{Deposit due with form}} = \text{Balance due 3/25/14}$

Check payment method below:

- _____ Charge deposit(s) to my credit card on file with the Recreation Department
- _____ Charge full amount to my credit card on file with the Recreation Department
- _____ Check payable to "Town of Bedford" included with form

Parent Signature: _____ **Date:** _____