

ENRICHMENT  
EDUCATIONAL  
EXPERIENCES

818.989.7509 (p) / 818-989-1763 (f)

www.enrichmentkids.com

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## ANNOUNCING A SPECIAL 2 DAY CAMP @ GOETHE INTERNATIONAL CHARTER

**DATES: THURSDAY, NOVEMBER 1<sup>ST</sup> 2012 & FRIDAY, NOVEMBER 2<sup>ND</sup> 2012**

**TIME: 8AM – 6PM**

Our staff will be conducting art activities, science projects, games, sport activities, obstacle courses and more!

<b>Tuition for Current E3 Families</b> (Students who are enrolled in a regular schedule)	<b>Tuition for Non-E3 Families</b> (Students who are not currently enrolled in our after-school program)
8am – 3pm / \$42 a day (\$6 an hour)  <b>E3 families who already pay until 5pm or 6pm will not be charged extra for those hours.</b>	8am – 3pm / \$70 a day 8am – 5pm / \$90 a day 8am – 6pm / \$100 a day (\$10 an hour)

Please provide a lunch and additional snacks for your children.

To enroll, please complete the tear off below and submit it to Goethe's main office.

**Forms must be received no later than 4pm on Tuesday, October 30th 2012.**

**Late applications will NOT be accepted.**

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Allergies: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Daytime Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Please check all applicable items:

☐ **I am currently enrolled in E3.**

I would like to enroll on ☐ **Thursday, November 1<sup>st</sup> 2012** ☐ **Friday, November 2<sup>nd</sup> 2012**

☐ Please charge my credit card on file. ☐ I will mail a check to: P.O. Box 4447 Valley Village, CA 91617

☐ **I am NOT currently enrolled in E3.**

I would like to enroll on ☐ **Thursday, November 1<sup>st</sup> 2012** ☐ **Friday, November 2<sup>nd</sup> 2012**

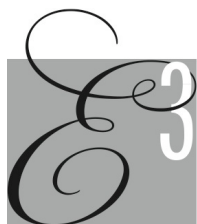
I need care from: ☐ **8am – 3pm** ☐ **8am – 5pm** ☐ **8am – 6pm**

☐ Please charge my credit card (must complete attached form).

\*A minimum of 25 students per day are required to run this camp.

☐ I hereby enroll my child in the Enrichment Educational Experiences / E3 program at Goethe International Charter. I hereby expressly forever release and discharge Enrichment Educational Experiences / E3, LAUSD and all instructors, employees, agents, and consultants of Enrichment Educational Experiences / E3 of liability for any claim, demand, injury, expense, damage, action or cause of action arising out of or connected with the use of the services or facilities of Goethe, Enrichment Educational Experiences / E3 including those arising from acts of active or passive negligence on the part of Enrichment Educational Experiences / E3, its instructors, employees, servants or agents.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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# CREDIT CARD AUTHORIZATION FORM

## GOETHE 2 DAY CAMP (November 1<sup>st</sup> 2012 and November 2<sup>nd</sup> 2012)

(Only to be filled out if you are new to E3 or have never paid by CC)

Payments for Enrichment Programs can be made for the full year, one payment for each semester or ten monthly payments. If you choose to have the tuition automatically taken from your credit card account, please fill out the authorization below and mail or fax (818-989-1763) it to our office. **A \$2.00 credit card transaction fee will be added throughout the 2012 - 2013 school year.**

- ◆ If you need to change the credit card on file, **you must complete a new CC Authorization form by the 1<sup>st</sup> of the month.** We cannot accept credit card information over the phone.
- ◆ You must notify our office if your child is no longer attending the program **before the 1<sup>st</sup> of the month.** If you fail to do so, and your credit card is charged, no refunds will be given.
- ◆ **Listing a secondary account number is required.**
- ◆ **If the primary credit card is declined, the secondary card on file will be charged.** Should both cards decline, cash, check or money order will be required.
- ◆ WE ARE NOT RESPONSIBLE FOR BANK CHARGES DUE TO A DECLINE OR OVERDRAFT.

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

### Primary Account

Name (as it appears on credit card): \_\_\_\_\_

**Acct. Number:** \_\_\_\_\_ **Exp Date:** \_\_\_\_\_

Billing Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

☐ Visa ☐ Master Card ☐ American Express

### Secondary Account

Name (as it appears on credit card): \_\_\_\_\_

**Secondary Acct. Number:** \_\_\_\_\_ **Exp Date:** \_\_\_\_\_

Billing Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

☐ Visa ☐ Master Card ☐ American Express

### Programs (please check the appropriate box):

<input type="checkbox"/> <b>AM Program</b> (@ Diamond Point, Nestle and Serrania ONLY)  <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F	<input type="checkbox"/> <b>After-School Enrichment</b>  <input type="checkbox"/> 5 DAYS <input type="checkbox"/> 4 DAYS <input type="checkbox"/> 3 DAYS <input type="checkbox"/> 2 DAYS <input type="checkbox"/> 1 DAY  <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F
<input type="checkbox"/> <b>Goethe 2 Day Camp</b>  Thursday, 11/1/12 Time: Friday, 11/2/12 Time:	<input type="checkbox"/> <b>Signature Class Only</b> (9-10 week session)  Name of Class: Session: (circle) 1 2 3 4

I hereby authorize Enrichment Educational Experiences/E3 to charge my credit card account by the 5th of the month for the tuition payment for my child's participation in the program.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_