

Child of God Summer Camp - Change Day Form

Parent Name:	Date:	
Child's Name:	Date/s ADDED:	Date/s REMOVED:
NOTIFICATION OF APPROVAL WILL BE M.	ADE WITHIN 24 HOURS OF	DATE OF FORM SUBMISSION
I understand that in order to avoid being charmonday prior to the requested week of changemailed or phoned into the office; all requests understand that due to new restrictions that lievent a drop in is made without form submiss	e. I understand that no change must be through this formNemit the class sizes, drop in's a sion/approval and there is not	ge in days requests will be IO EXCEPTIONS. I further are prohibited. In the unlikely room in the class, I will be called
to pick up my child/children. No refunds will be a parent/Guardian Signature:	be given for failing to snow on	an added date. Date:

If you have any questions please email Samantha Sturgeon, our Camp Director at beyondthebell@coglcs.com. We thank you for your cooperation!