MoLab, Inc.'s Camp Spark – Igniting Knowledge!

Extended Care Registration Form

(Only fill this form out if adding extended camp care after the original registration has been submitted)

Camper's Name: _____ Grade Level: _____

Pre-Camp Extended Care (7:45 a.m. - 9:00 a.m.) **$5/day**
Please circle the daily camp session(s) for which pre-camp care is desired.

Monday	Tuesday	Wednesday	Thursday	Friday	Monday
16	17	18	19	20	23

Notes: _____

Post-Camp Extended Care (4:00 p.m. - 6:00 p.m.) **$5/day**
Please circle the daily camp session(s) for which post-camp care is desired.

Monday	Tuesday	Wednesday	Thursday	Friday	Monday
16	17	18	19	20	23

Notes: _____

TOTAL EXTENDED CARE FEES $_____

TOTAL EXTENDED CARE FEES ENCLOSED $_____

PayPal Confirmation Number _____

Forms and payment may be mailed with a check or money order. Cash payments in person are accepted once camp is in session.

Credit card payment must be made at www.tallymolab.org using MoLab, Inc.'s PayPal account. After completing your PayPal transaction, please write the confirmation sequence on this form and send by mail to the address below or by email to aimee@tallymolab.org.

Mail to: MoLab, Inc. Camp Spark – Igniting Knowledge!
1700 North Monroe Street, Suite 11-223
Tallahassee, FL 32303
Email to: aimee@tallymolab.org