

Saint Joseph 2023 Change Form

MEMBER
NON-MEMBER

BY GENESIS HEALTH CLUBS		Team Member Name:
	Į.	Date Received:
Camper Name:		
Cancellations	Г	
Camp Weeks M-F MWF TTh M May 30-June 2	T W Th F	Elective Class Options
1		Session/Week: 1 2 3 4 5 6
June 5-9		Swim Lessons:
June 12-16		7 8 9 10 11
June 19-23		
June 26-30		
5 July 3, 5-7		
6	×	Session/Week: 1 2 3 4 5 6
7 July 10-14	-	Tennis Lessons:
8 July 17-21		7 8 9 10 11
9 July 24-28		
July 31-August 4		
10 August 7-11		PROGRAM CANCELLATION POLICY:
11		Two weeks prior to the start of the cancelled week (Monday at 9am), schedule changes can be made free of charge by emailing an electronic Change Form to nikole.bielby@genesishealthclubs.com
Additions Camp Weeks M-F MWF TTh M May 30-June 2 X June 5-9 June 12-16 June 19-23 Additions	T W Th F	On or after the deadline, refunds for camp fees will only be processed if a child on the waitlist can take the cancelling child's spot in camp. If the requested cancellation date cannot be filled by a waitlist camper, the spot in camp will remain reserved for the enrolled camper and therefore a refund will not be processed. There is a \$25 processing fee for Change Forms processed after the deadline. Change Forms will only be processed if a child on the waitlist can take the cancelling child's spot in camp. Cancellation Due to Camper Sickness: To support with daily operations, although a refund is not warranted, parents are asked to call the Camp Desk at 816.385.5264 Ext: 704 to ensure clarity.
July 3, 5-7	×	If a participant becomes ill during the program day the participant's parents will be notified. The team leader will communicate with the participant's parents to arrange a pick up. If a camper departs early due to illness no portion of the program fees is refundable.
July 10-14		acparts carry due to lilliess no portion of the program lees is retuinable.
7 July 17-21	+ $+$ $+$ $+$ $+$	
8 July 24-28		Camp Pricing:
9		Member Non-Member M-F \$ 165 \$ 185
July 31-August 4		MWF \$ 116 \$ 130
August 7-11		T/Th \$82 \$94
		Single Day \$ 41 \$ 47
Team Member Use:		Parent Name:
Date Processed:		Parent Signature:
Processed By:		Date: / /