



Christ Memorial Lutheran Early Childhood Learning Center

Christ Memorial Lutheran ECLC 14200 Memorial Drive - Houston, Texas 77079
(281) 497-2055 ECLCOFFICE@CMLHOUSTON.ORG www.CMLECLC.org

"Train up a child in the way he should go... and he will not depart from it." Proverbs 22:6

2026 SUMMER CAMP REGISTRATION FORM

Child's Full Name: _____ Date of Birth: ___/___/___ Male/Female

MM DD YY (Circle One)

Home Address: _____ Zip Code _____

Email: _____ Siblings attending CML Camp: _____

Mom's Name: _____ Mom's Cell #: _____

Dad's Name: _____ Dad's Cell #: _____

Does your child speak English? _____ What language is spoken at home? _____

Child's Physician Name: _____ Phone: _____

How did you hear about CML? _____

STUDENT HEALTH

Please list any allergies, existing illnesses, previous serious illnesses/injuries, hospitalizations during the past 12 months, and/or any medications prescribed for continuous, long-term use.

If applicable, INITIAL _____ I will provide a Food Allergy and Anaphylaxis Emergency Care Plan to CML.

EMERGENCY CONTACT

Person to be contacted in an emergency when the parent(s) cannot be reached.

Name Address Cell # Relationship to Child

RELEASE PERMISSION

Person(s) other than a parent to whom the child may be released.

Name Cell # Relationship to Child

Name Cell # Relationship to Child

Please circle which session(s) your child will attend.

There is a one-time, non refundable \$125 registration fee per child

Registration fee is due at the time of enrollment

WEEK 1 \$250 * Weeks 2-10 \$275

May and June tuition due May, 25 2026 * July and August tuition due by July 13, 2026

Camp is from 9:00 A.M. - 2:00 P.M. * Child must be 18 months old by May 25, 2026

Week 1: May 26- May 29 (4 day week) Week 2: June 1 - June 5 Week 3: June 8 - June 12	Week 4: June 15 - June 19 Week 5: June 22 - June 26 Week 6: July 13 - July 17	Week 7: July 20 - July 24 Week 8: July 27- July 31 Week 9: August 3 - August 7 Week 10: August 10 -14
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I have enclosed a one time, non-refundable \$125 Registration Fee to enroll my child in 2026 CMLECLC summer camp. Registration Payment: ___ Vanco ___ Check ___ Cash. Tuition is non-refundable. If a child misses the entire week (Monday-Friday) due to illness, we will do our best to accommodate an alternate week during the summer.

Parent/Guardian Signed & Acknowledged _____ Date _____