



CAMP COLLIER



Full Summer Discount Program Terms and Conditions

Program

The Full Summer Discount Program is available to any participant enrolling in all nine weeks of CAMP COLLIER Summer Camp. The discount of 22% will be seen at the time of registration if payment is made in full. If our 3-Payment Plan is used, the discount of 22% will be seen on the final payment. An additional discount is available to families enrolling multiple children.

Fees

First Child - \$600 per participant for the first child (22% discount - \$165 savings)

Add'l Child(ren)* - \$540 per participant for additional children. (29% discount - \$225 savings)

* **Additional children must be from the same immediate family in order to qualify for discount.**

Payment Plan

A payment plan is available and will consist of four payments. Initial payment is \$150.00 for 1st Child and \$135.00 for additional family members / child.

Due Dates

1st Payment: March 1, 2025

2nd Payment: April 1, 2025

3rd Payment: May 1, 2025

4th Final Payment: May 23, 2025

Requirements

1. Fees must be paid at time of registration OR on or before Payment Plan Due Dates. At no time may an account become delinquent. If payment is not made on time participant's spot may be forfeited.
2. Participants are responsible for the **FULL** Summer Discount Program Fee (\$600.00 or \$540.00) regardless of program attendance unless the participant has submitted a written request to withdraw from the Full Summer Discount Program.
3. The written request to withdraw is effective the date it is received by the Collier County Park office associated with the camp the participant is enrolled in.
4. Participants withdrawn from CAMP COLLIER Full Summer Program prior to the end of camp will forfeit all discounts and will be re-assessed fees at the customary rate of \$85.00 per week.

I agree to abide by all terms and conditions of the FULL SUMMER DISCOUNT PROGRAM AGREEMENT. I understand that failure to make timely payments will result in termination from the FULL SUMMER DISCOUNT PROGRAM and I will be assessed fees based on the weekly rate of \$85.00 per week per child.

Name of participants: _____

Account holder: _____

Account holder signature: _____

Date: _____