

Bethesda Community School, Inc.

SUMMER PROGRAM 2024 ENROLLMENT FORM

Child's Name: _____ Date of Birth: _____

Address: _____

Phone: _____

Please choose a Session(s) by checking applicable box and then circle the days and time you would like your child to attend:

- Session # 1: June 17 – June 28, 2024** (week of 6/24 BCS will close at 3:00)
Days: M T W TH F (please circle—minimum of 3) Time: 8-12 8-1 8-3 8-5:30 (please circle)
- Session # 2: July 1 – July 12, 2024** (Thursday July 4th is a holiday)
Days: M T W TH F (please circle—minimum of 3) Time: 8-12 8-1 8-3 8-5:30 (please circle)
- Session # 3: July 15 – July 26, 2024**
Days: M T W TH F (please circle—minimum of 3) Time: 8-12 8-1 8-3 8-5:30 (please circle)
- Session # 4: July 29 – August 9, 2024**
Days: M T W TH F (please circle—minimum of 3) Time: 8-12 8-1 8-3 8-5:30 (please circle)
- Session # 5: August 12 – August 16, 2024 (One week)**
Days: M T W TH F (please circle – minimum of 3) Time: 8-12 8-1 8-3 8-5:30 (please circle)
- Session # 6: August 19 – August 23, 2024** (Students enrolled at BCS for 2024 - 2025 only)
Days: M T W TH please circle—minimum of 3) Time: 8-12 8-1 8-3 8-5:30 (please circle)

Provided the existence of available space at the time of my submission of this enrollment application, by my signature below, I am enrolling my child in the BCS Summer Program with the schedule indicated above:

Parent Signature: _____ Date _____

**7500 Honeywell Lane, Bethesda, Maryland 20814
301-652-0117**