



Name of Student: _____
Last Name First Name Middle Name

School Student Currently Attends: _____ Date of birth: _____

Student ID # _____ *If your child does not have a student ID #, one will be assigned after registering in summer camp.*

Does student have an IEP/Service Plan/504 Plan? ☐ No ☐ Yes - Please attach a copy of IEP/Service Plan/504 Plan

Parent Name: _____

Address: _____
Street City State Zip

Cell Phone: _____ Home/Work Phone: _____

Email: _____

☐ Yes, I would like to register my child for the **2025 Roberts Academy Summer Reading Camp**.

☐ I understand that a \$50 non-refundable registration fee along with the fee for the summer session(s) selected below will be billed to my child's Florida Southern student account. I understand this balance must be paid in full prior to the start of the summer session(s) selected.

Select the grade your child completed in the 2024-2025 school year: K 1 2 3 4 5 6 7

Select the session(s) your child will attend:

- | | | | |
|--------------------------|---------------------------------|---------------|----------|
| <input type="checkbox"/> | Non-Refundable Registration Fee | | \$ 50.00 |
| <input type="checkbox"/> | Week of June 9-13, 2025 | 8:30-11:30 am | \$150.00 |
| <input type="checkbox"/> | Week of June 16-18 & 20, 2025 | 8:30-11:30 am | \$120.00 |
| <input type="checkbox"/> | Week of June 23-27, 2025 | 8:30-11:30 am | \$150.00 |
| <input type="checkbox"/> | Week of July 14-18, 2025 | 8:30-11:30 am | \$150.00 |
| <input type="checkbox"/> | Week of July 21-25, 2025 | 8:30-11:30 am | \$150.00 |

Total charge to student account: _____

Parent Signature: _____ Date: _____

Full payment must be made to FSC before the start of summer reading camp to reserve a seat.

All fees are non-refundable.

All documentation will be reviewed and parents will be notified of Summer Camp acceptance.

*Students who do not currently attend Roberts Academy and who have an IEP, Service Plan, or 504 Plan must submit all testing information and copies of the IEP/Service Plan/504 Plan along with the application.

Return registration to:

Roberts Academy, 1140 Frank Lloyd Wright Way, Lakeland, FL 33801

Fax: 863/680-3971 or email the application to RobertsAcademy@flsouthern.edu

Call (863) 680-3741 with any questions