



## SUMMER PROGRAM REGISTRATION 2018

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Primary Language: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Parent/Guardian Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_ Employer Address: \_\_\_\_\_

Employer Telephone: \_\_\_\_\_ Employer Telephone: \_\_\_\_\_

Hours at work: \_\_\_\_\_ Hours at work: \_\_\_\_\_

Email address: \_\_\_\_\_

**Please circle the days you would like, next to the session(s) in which you wish to enroll (ex: M,W,F or T,TH).\*\*\* No Summer program July 4th week\*\*\***

	Weekly Themes	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1	<b>Summer Fun</b>	6/11	6/12	6/13	6/14	6/15
Week 2	<b>Lights, camera, Action</b>	6/18	6/19	6/20	6/21	6/22
Week 3	<b>Happy Un-Birthday//4th of July</b>	6/25	6/26	6/27	6/28	6/29
Week 4	<b>Chill Out Week</b>	X	7/10	7/11	7/12	X
Week 5	<b>Eric Carle Creations</b>	X	7/17	7/18	7/19	X
Week 6	<b>Splish, Splash, Mud</b>	X	7/24	7/25	7/26	X
Week 7	<b>Off to the Castle</b>	X	7/31	8/1	8/2	X

**\*To enroll, return a completed registration form and a non-refundable deposit for \$150 . Incomplete registration forms will not be accepted.**  
**ECDC Summer Program cost is \$35/day, \$63 for two siblings attending the same day.**

**Other Emergency Contacts: if parents cannot be reached, please notify:**

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

**Pick-Up Authorization**

If you would like your child picked up at school by anyone other than yourself, please complete the information below. If someone not listed is to pick up your child, the staff must receive written permission prior to releasing your child to that person.

I authorize ECDC Nursery School, Inc. to release my child \_\_\_\_\_ to:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Transportation provided by: Parent Drop off & Pick up \_\_\_\_\_ Arranged by Parent \_\_\_\_\_

**Medical Information**

**ALL children must provide a COMPLETED MEDICAL FORM BEFORE they can participate in the program and must be CURRENT ON ALL IMMUNIZATIONS. Please attach to this form.**

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Health Plan ID: \_\_\_\_\_

**Child's Identifying Information**

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Gender: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Skin Color: \_\_\_\_\_

Identifying Marks: \_\_\_\_\_

Allergies/Special Diets: \_\_\_\_\_

**Medical Emergency Permission**

In case of a medical emergency, I give ECDC Nursery School, Inc. permission to provide basic first aid to my child \_\_\_\_\_. I understand that every reasonable effort will be made to contact me in the event of an emergency. Additionally, I hereby authorize ECDC Nursery School, Inc. to transport my child to the hospital to secure medical treatment in the event of an accident or other medical problem when basic first aid is not adequate.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Administration use only:

Date: \_\_\_\_\_ Deposit paid \_\_\_\_\_ Medical Form on Filed/ Date: \_\_\_\_\_ Email \_\_\_\_\_

Dear Parents,

Starting March 8<sup>th</sup>, registration will take place for all families interested in the ECDC summer program. All children must be 2 years 9 months old to attend the ECDC summer program and may attend through the summer before Kindergarten. If you are interested in sending your child to the camp please return the attached sheet to Heather Inferrera or Ally Hamilton, ECDC Directors ASAP.

The ECDC Summer Playground Program is a summer of “Fun in the Sun”. Our early childhood developed curriculum consists of music, stories, crafts, nature exploration, games and playtime all centered around weekly themes. Sessions will run from 9AM - Noon, Monday through Friday during the month of June and Tuesday through Thursday during the month of July. In case of inclement weather, sessions will be held in the ECDC classrooms. A mid-morning snack will be provided by the program each day.

ECDC is offering this program at the rate of \$35 per day. If two siblings attend the same day the cost is \$63 per day. A \$150 non-refundable deposit is due with the registration form. The remainder of the payment is due at the beginning of the summer program. Please make checks payable to ECDC Nursery School and return your completed registration form. **Incomplete registration forms will not be accepted.**

This year lunch bunch will be available for the children Monday through Thursday, from 12PM – 1PM, during the month of June. In July lunch will be available Tuesday- Thursday if enough people sign up to utilize it. The cost will be \$10 per day and will be billed separately from the tuition fees. Please send your child with a labeled lunch. Don't forget a cooler pack!

**Any unused camp payments may be used for substitute days if availability exists. No refunds will be given.**

Remember: The first two weeks fill the fastest since older siblings are still in school!

**Please note we will be closed July 2-9<sup>th</sup>.** We will re-open July 10<sup>th</sup>, which will start our 3 day July schedule.

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Week 4	<b>Chill Out Week</b>	X	7/10	7/11	7/12	<b>X</b>
Week 5	<b>Eric Carle Creations</b>	X	7/17	7/18	7/19	<b>X</b>
Week 6	<b>Splish, Splash, Mud</b>	X	7/24	7/25	7/26	<b>X</b>
Week 7	<b>Off to the Castle</b>	X	7/31	8/1	8/2	<b>X</b>