



# Preschool of SCCS

## Summer Program Application



Child's Full Name: \_\_\_\_\_ Male / Female

Date of Birth: \_\_\_\_\_

Are you a current student of Preschool of SCCS: \_\_\_\_\_ What Class: \_\_\_\_\_

Will you be a new student of SCCS for the 2018/19 year? \_\_\_\_\_

If yes, what program are you enrolled in? 3yr \_\_\_\_\_ 4yr \_\_\_\_\_ PreK \_\_\_\_\_ K \_\_\_\_\_

### Contact Information

Child lives at home with: Mom Dad Both Guardian

Guardian/Parent: \_\_\_\_\_ Contact Number: \_\_\_\_\_

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

Place of Employment: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Guardian/Parent: \_\_\_\_\_ Contact Number: \_\_\_\_\_

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

Place of Employment: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Primary E-mail for Communication:  
\_\_\_\_\_  
\_\_\_\_\_

People other than parent/guardian who are allowed to pick up child from camp:  
(must provide ID when picking up child)

Name	Relationship	Contact Number
1. _____		
2. _____		

#### Emergency Medical Contact

Medical Insurance: \_\_\_\_\_ Provider/Group# \_\_\_\_\_

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

In case of emergency call (someone other than parent/guardian)

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

Please list any health issues or allergies your child may have:

\_\_\_\_\_

#### Summer Program Weekly Sessions

Weekly sessions will run Monday through Friday from 8:30 – 12:00, with student drop-off beginning at 8:15 and the cost is \$100 per session. If you sign up for all eight sessions, you will receive a discount of \$100.

	Dates	Theme
Week 1	May 21 - 25	How does your garden grow?
Week 2	May 29 - June 1	Dinosaurs
Week 3	June 3 -8	Outer space
Week 4	June 11 - 15	Zoo
Week 5	June 18 - 22	Let's go Camping!

Week 6	June 25 – June 29	America
Week 7	July 9 - 13	Bugs!
Week 8	July 16 - 20	Under the Sea
Week 9	July 23 – July 27	Bible “Superheros”

Please circle which weeks your child will be attending:

Week 1      Week 2      Week 3      Week 4  
 Week 5      Week 6      Week 7      Week 8      Week 9

#### Payment Information

A **non-refundable** \$50.00 registration fee is due with this application. Cost of camp is \$100/wk. If you enroll for **ALL nine weeks** you will receive **one week FREE!**

Payment for weekly sessions will be billed through RenWeb as follows:

May Sessions (Week 1 and 2) will be billed in April

June sessions (Week 3, 4, 5 and 6) will be billed in May

July sessions (7,8, and 9) will be billed for in June

Sessions must be paid for, **BEFORE** attendance to the camp will be permitted.

**Please be aware**, we staff camp according to the number of registrations that we have per week. If you register for camp and are unable to attend you will still be charged 50% of the tuition for that week.

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

Office Use Only

Date Received:\_\_\_\_\_ Enrollment Fee:\_\_\_\_\_

Staff Signature:\_\_\_\_\_

