

Kid's Place A Place For Kids To Be II, Inc.
Site Address 60 Liberty Street, Beacon, New York 12508
Mailing Address P.O. Box 168, Beacon, New York 12508
Telephone (845)838-9934 Facsimile (845)838-9935
E-mail akidsplacebeacon@gmail.com/ www.kidsplacebeacon.org

Liberty Street Summer Camp 2018

Child's Name _____ Date of Birth _____
School Child Attends _____ Grade as of 9/1/18____ Child's Gender M / F
T Shirt Size ____ with whom does the child reside _____
Guardian 1 _____ Relationship to child _____
E-mail Address _____ (To be used for billing and newsletters)
Employer _____ Daytime Phone _____
Home Address _____
Eve phone _____ Cell _____
Guardian 2 _____ Relationship to child _____
E-mail Address _____ (To be used for billing and newsletters)
Employer _____ Daytime Phone _____
Home Address _____
Eve phone _____ Cell _____
Emergency Contact Name (other than parent) _____
Relationship to child _____ Phone Number _____

List all persons authorized to pick up child at the end of the day. Include yourself if appropriate. **ONLY THOSE LISTED MAY PICK UP YOUR CHILD! (Please Print)** We will not release your child to anyone who is not listed below. If you should need to add a person please call the office

As the guardian of _____ I (print your name) _____
herby give my child permission to participate in Kid's Place program and activities and events including, but not limited to the following (please initial each) Trips _____ Swimming _____ Photos and videos _____
I understand no adjustments will be made to fees due to absence for any reason including failure to supply the properly completed medical form, illness, or failure to adjust to the program. I understand that Kid's Place A Place for Kid's To Be II, Inc. staff will make every effort to provide a positive experience for my child. However, if my child cannot live within the rules of the center or if her/ his behavior adversely affects the experience of other children, I understand s/ he will be dismissed. The center will not refund any fees after June 1st. I further understand that as the Parent/ Guardian my behavior may be the cause of dismissal from the center. This behavior may include but not limited to posting negative comments on social media concerning the program, staff members or other children enrolled in the program. Kid's Place A Place For Kids To Be II, Inc., reserves the right to cancel any activities due to occurrences beyond their control.

Signature _____ Date _____ Relationship to child _____

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Sibling Discount 10% off each additional child's weekly program fees when enrolled during the same week (applied to the lowest fee)

Refer a friend Discount: \$10 of your families' weekly fee when a friend registers stating your name during enrollment. This must be a new family to the center not previously enrolled (limit 3)

During the hours (place a check next to your program weekly Fee's)

8:30am To 5pm: \$230. Five, days ___ \$210. Four days ___ \$180 Three, days ___

6:30am To 8:30am: \$25 weekly 5pm- 6:30pm \$25 Weekly

Morning and Afternoon Extended Combined \$40 weekly

Camp will be closed on July 4 in observance of Independence Day

Week	Days	Extended
6/25 Disney Pixar	M T W R F	AM PM Both
7/2 Americana	M T R F	AM PM Both
7/9 Globe trotters	M T W R F	AM PM Both
7/16 Fun- gineering	M T W R F	AM PM Both
7/23 Wild West	M T W R F	AM PM Both
7/30 Galaxy Far Away	M T W R F	AM PM Both
8/6 Animal Planet	M T W R F	AM PM Both
8/13 Ship Wrecked	M T W R F	AM PM Both
8/20 Hawaiian Hullabaloo	M T W R F	AM PM Both
8/27 Bon voyage Summer	M T W R F	AM PM Both

Number of weeks _____ x weekly fee _____ + Extended Fee _____ = _____

Registration Fee _____ Total Due \$ _____

Children may not attend the session if payment is not paid by the Friday prior to start date.

I understand that submitting this form is securing a seat for my child in the weeks that have been selected. There are no refunds for any changes to my child's schedule, including a reduction of days. A one-week deposit as well as a \$75.00 registration fee is due with this application. ALL FEES ARE NON-REFUNDABLE. Payment in full is due by June 1, 2018