



# PRESCHOOL, PRE-K, ADVANCED PRE-K, AFTER-SCHOOL SUMMER REGISTRATION

Register your child for our Summer Session by completing this registration form and returning it to us by Friday February 28. After February 28, we'll open the summer camp registration to everyone. If we don't have your form filled out by February 28, we'll assume you don't need a classroom space during the summer.

CHILD'S NAME	BIRTH DATE
CURRENT TEACHER NAME	CURRENT CLASSROOM <small>check one</small>
<input type="checkbox"/> After-School <input type="checkbox"/> Preschool <input type="checkbox"/> Pre-K <input type="checkbox"/> Adv. Pre-K	

MOTHER	FATHER
NAME	
ADDRESS	
CITY/ZIP	
HOME PHONE	
WORK PHONE	
CELL PHONE	
EMAIL	

**Please note during the summer months we are more flexible with your schedule. *Just for the summer*, you have the option to select what months / weeks you would like to attend school. Please note the summer monthly fee is the same as the current school year monthly fee.**

My child will **NOT** attend YPW this Summer Session

Aug 12            Last day of Summer Camp  
 Aug 13, 14 & 17   School Closed. Staff In-service  
 Aug 18            First day of 2019 – 2020 School Year

**For Office Use**

DATE RECEIVED:	\$	Check#	Notes:
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**MONTHLY OPTION ONLY FOR CURRENT PRESCHOOL, PRE-K AND ADV. PRE-K STUDENTS**

Please Mark Below Each Month/Week Your Child Will Attend During This Summer  
 Summer Material Fee \$80.

**If not attending the whole summer, we need to receive your pre-paid tuition and Summer Material Fee by March 15.**

*Please note during the summer, monthly tuition rate and school schedule is the same as in the school year  
 This option is only available during the Summer. We'll expect you to attend the months/weeks you specify in this form.  
 Your child will be scheduled for these specific months/weeks. Additional months may be added or changed and subject to availability.  
 School director must be contacted at least two weeks in advance to approve any change in the Summer schedule.  
 Additional months or changes are based on enrollment and may not always be available.*

<b>Check Box ( )</b> if attending entire month	<input type="checkbox"/> June 1 – 30	<input type="checkbox"/> July 1 – 31	<input type="checkbox"/> Aug 1 - Aug 12
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**WEEKLY OPTION ONLY FOR CURRENT PRESCHOOL, PRE-K, ADV. PRE-K AND AFTER-SCHOOL STUDENTS**

Please Mark Below Each Week Your Child Will Attend During This Summer

**Summer Material Fee \$80 + Summer tuition. Please pay by March 15 with a check or credit card to the office**

*Please note payment in full is required to hold a spot for specified weeks. This option is only available during the Summer.  
 We'll expect you to attend the weeks you specify in this form as registration is binding, and you will be financially responsible for the specified weeks.  
 Your child will be scheduled for these specific weeks. Additional weeks or changes are based on enrollment and may not always be available.  
 School director must be contacted at least two weeks in advance to approve any change in the Summer schedule.  
 Note: these prices already reflect the Early Bird Special of -\$30 per week when registering by March 31st.*

<b>Check Box ( )</b> if Attending	<input type="checkbox"/> June 1-5	\$280	<input type="checkbox"/> June 29-July 2	\$240	<input type="checkbox"/> July 27-31	\$280
	<input type="checkbox"/> June 8-12	\$280	<input type="checkbox"/> July 6-10	\$280	<input type="checkbox"/> Aug 3-7	\$280
	<input type="checkbox"/> June 15-19	\$280	<input type="checkbox"/> July 13-17	\$280	<input type="checkbox"/> Aug 10-12	\$190
	<input type="checkbox"/> June 22-26	\$280	<input type="checkbox"/> July 20-24	\$280		

**I have read the all of the registration information of this agreement and I understand that this registration agreement is binding, tuition is due and payable for all selected weeks, and all amounts paid are non-refundable.**

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**AUTHORIZATION TO CONSENT TO MEDICAL TREATMENT AND RELEASE TO PARTICIPATE**

I (parent's name) \_\_\_\_\_ binding my heirs, executors, administrator, estate and assigns, do hereby release and agree not to hold liable Young Peoples Workshops (YPW), their officers, agents and employees, from any and all actions, causes of actions, claims, demands, costs or damages as a result of property damage or personal injuries sustained by myself, my child/children, or my property arising from or resulting from any act of omission or otherwise, of Young Peoples Workshops, their officers, agents and employees while participating in an YPW workshop or activity. I further release Young Peoples Workshops, their officers, agents and employees from all liabilities for personal injury resulting from my child's failure or the failure of other participants in the activity to obey safety regulations and directions of the activity leader in good faith, in response to emergencies and exigencies which occur during the activity; provided however that nothing contained herein shall excuse any employee of YPW or person assigned to be an activity leader by an employee of Young Peoples Workshops, from the responsibility to act with reasonable care for my child's safety during the course of the activity appropriate to the circumstances.

I hereby authorize Young Peoples Workshops to consent to emergency medical or dental treatment for my child while my child is a participant in a Young Peoples Workshops program. I understand that Young Peoples Workshops will make all reasonable efforts to contact me and provide me with notice in the event that my child requires emergency medical or dental treatment.

In the event that YPW cannot contact me and give me notice, I understand that I am hereby authorizing YPW to consent to such treatment on my behalf. I understand that YPW will seek necessary emergency treatment for my child only in the event my child is injured or harmed while engaged in a workshop or activity sponsored by Young Peoples Workshops.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**PHOTO USAGE**

I hereby give consent to Young Peoples Workshops to use photographs of my child, in advertising publications, including but not limited to, print, video, and electronic media, produced by Young Peoples Workshops. I understand that the email address provided above will be used no more than three times per month to disseminate YPW photos, news or evaluations ONLY and will not be sold or provided to any other entity or institution for any reason. I understand I can be removed from the mailing list at any time by request.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_