

ONE FORM PER CHILD, PLEASE

Child's Name _____ Date of Birth _____

Parent's Name(s) _____ Home# _____ Cell# _____

Date Child will begin Program _____ Grade Child completed in May _____

*****Students must be 2 years old to fifth grade and have a current Certificate of Immunization on file to attend the summer program*****

Student placement is on a first registered basis. A \$25 enrollment fee must accompany this registration form. The fee is refunded only if the program becomes full.

Which session will you be attending? Please select one or both:
Session 1 = 5/29/18 - 6/22/18 Session 2 = 6/25/18 - 7/20/18

<p>Before Care 6:00am — 8:30am</p> <p>Students will rest on mats until 7:15am; they may bring breakfast to eat when they wake.</p>	<p>Cost: \$5.25 per day</p>	<p><input type="checkbox"/> Please check this box if you will require before care for your child.</p> <p>Please circle days needed: M T W TH F</p>
<p>FULL Day Option 8:30am- 3:30pm</p> <p><u>Note: Before/After care NOT included.</u></p> <p>Students will enjoy chapel, music, recess, crafts, math, science, reading, water play, snack, lunch (from home) and rest time.</p>	<p>Cost: M/W/F \$72.00 per wk T/TH \$46.50 per wk M-F \$118.50 per wk</p>	<p><input type="checkbox"/> Please check this box if you would like the FULL day option for your child.</p> <p>Please circle one of the 3 day combinations below. M/W/F T/TH M - F</p>
<p>1/2 Day Option 8:30am-12:00pm</p> <p><u>Note: Before/After care NOT included.</u></p> <p>Students will enjoy chapel, music, recess, crafts, water play, snack, etc.</p>	<p>Cost: M/W/F \$41.50 per wk T/TH \$31.00 per wk M-F \$72.00 per wk</p>	<p><input type="checkbox"/> Please check this box if you would like the HALF day option for your child.</p> <p>Please circle one of the 3 day combinations below. M/W/F T/TH M - F</p>
<p>After Care 3:30 pm- 6:00pm</p> <p>Students will enjoy recess, games, snack, etc.</p>	<p>Cost: \$10.50 per day</p>	<p><input type="checkbox"/> Please check this box if you will require after care for your child.</p> <p>Please circle days needed: M T W TH F</p>
<p>FULL WEEK CARE "The Works!" 6:00 am-6:00 pm Monday-Friday</p> <p>This option includes before and after care as well as the FULL day option.</p>	<p>Cost: \$175 per week</p>	<p><input type="checkbox"/> Please check this box if you would like the FULL WEEK CARE option for your child.</p>

OFFICE USE ONLY:

STUDENT INFORMATION

NAME: _____ M F DOB ____/____/____ Ethnicity _____
LAST FIRST MIDDLE (Circle One)

ADDRESS: _____ Child's SS# ____-____-____
STREET CITY STATE ZIP

Applicant lives with: Both parents Mother Father Guardian Other _____

MOTHER/GUARDIAN DATA

NAME: _____ SS# ____-____-____
LAST FIRST MAIDEN

ADDRESS: _____ PHONE: Home# () _____
STREET CITY STATE ZIP

Cell# () _____

Email address: _____

Place of Employment: _____ Occupation: _____ Phone# () _____

FATHER/GUARDIAN DATA

NAME: _____ SS# ____-____-____
LAST FIRST MIDDLE

ADDRESS: _____ PHONE: Home# () _____
STREET CITY STATE ZIP

Cell# () _____

Email address: _____

Place of Employment: _____ Occupation: _____ Phone# () _____

STUDENT PICK-UP AUTHORIZATION

Other than the mother & father listed, please provide names of people who have permission to pick your child up from school.

<u>NAME</u>	<u>PHONE#</u>	<u>RELATIONSHIP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Sunscreen Application Permission and Photography Release (please initial, sign & date)

_____ (Initial) I give permission for PCA staff to reapply sunscreen, which I have provided, on my child as needed for outdoor activities.

_____ (Initial) I give permission for PCA staff to take photos of my child during PCA activities that may appear in local media, parent newsletters, or on the school Facebook page.

Parent/Legal Guardian's Signature

Date

WELCOME TO THE PCA SUMMER PROGRAM

We are so glad that you have chosen to join us for the PCA Summer Program! We hope that your children will enjoy themselves and make many lasting memories.

The following informational page is for you to keep so that you may refer to it throughout the summer.

Information concerning the day to day activities will be sent via e-mail closer to program start date.

Billing: Billing statements will be sent via e-mail one or two weeks prior to the program start date. Payments for Session 1 are due by May 29th. Payments for Session 2 are due by June 25th. Families may pay in person at the school with cash, check, or money order. They may also pay by credit card or electronic check on RenWeb. If payments are not made by the 5th business day after the due date, a late fee of \$30 will be applied to your bill, and your child will not be permitted into the program until it is paid.

Scheduling and Vacation Credits: PCA will provide credits for vacations once during the summer. The number of days available for credit will be equal to the number of days your child is scheduled for during a week. For example, if you have registered your child for the M/W/F Half Day Option, then you may request vacation credits for 3 half days within the same week. Please submit your vacation credit requests to the front office at least a week before the scheduled vacation, credits cannot be applied after the fact. Single days through the summer cannot be credited; the days must be within the same week. After vacation day credits have been applied, additional days in which the child is absent will require payment. This policy is in place to insure that we have the appropriate staff scheduled each day.

Before and After Care Scheduling and Billing: Before and after care charges are billed in advance on the billing statement that is e-mailed one or two weeks before the program start date. Charges are not billed based on usage but on the schedule given to PCA when your child was registered. A schedule must be provided unless prior arrangements with the business office have been made. Random changes in schedule will not be credited. Changes to the schedule may be made if the office is notified at least 48 hours in advance.

Students staying for the full day option will need to provide their own lunch. 2 year olds staying over 3 ½ hours are required to nap for 2 hours. Children in the 3 yr old class will rest for 1 hour. A fitted crib sheet, small blanket and small pillow are needed for nap mats. All other students younger than kindergarten will have a 30 minute rest period.

PCA does not discriminate on the basis of race, color, national or ethnic origin in administration of its educational policies and admissions.