



**Curious Children Summer School Camp 2027
Registration Form & Parent Agreement**

PROGRAM INFORMATION

Dates: July 6 – August 13, 2027

Location: Curious Children Child Care Center

Hours: Monday–Friday, 8:00 AM – 5:00 PM

Ages: 3–5 Years Old

CHILD INFORMATION

Child's Full Name: _____

Date of Birth: _____ Age: _____

Home Address: _____

Allergies/Medical Concerns: _____

Physician's Name: _____

Physician's Phone Number: _____

PARENT/GUARDIAN INFORMATION

Parent/Guardian 1

Name: _____

Relationship to Child: _____

Phone Number: _____

Email Address: _____

Parent/Guardian 2

Name: _____

Relationship to Child: _____

Phone Number: _____

Email Address: _____

EMERGENCY CONTACT INFORMATION

Emergency Contact 1

Name: _____

Relationship: _____

Phone Number: _____

Emergency Contact 2

Name: _____

Relationship: _____

Phone Number: _____

Authorized Pick-Up Persons

Individuals listed below are authorized to pick up my child from the program:

1. _____
2. _____
3. _____

Authorized persons must be at least 16 years of age.

REGISTRATION OPTIONS

Please select:

Full 6-Week Program: \$4,200

() **Required Deposit (50%):** \$2,100 upon registration

Weekly Registration: \$750 per week

() **Required Deposit (50%):** \$375 per week upon registration

Please select from the list below:

Week 1: July 6 – July 9, 2027

Week 2: July 12 – July 16, 2027

Week 3: July 19 – July 23, 2027

Week 4: July 26 – July 30, 2027

Week 5: August 2 – August 6, 2027

Week 6: August 9 – August 13, 2027

Monday, August 16, 2027 (make-up day for July 5) - last day of Camp.

Number of Weeks selected: _____

Required Deposit (50% of selected weeks): _____

The balance is due prior to your child's first day of attendance:

Payment Information

Deposit Amount Enclosed: \$ _____

Check

Cash

Other: _____

Checks should be made payable to Curious Children Child Care Center.

PROGRAM POLICIES

Regular attendance is encouraged so children can fully benefit from the program. If your child will be absent, please notify the Center by phone or email.

MEALS

Nutritious snacks are provided daily. Parents/guardians are responsible for providing lunch each day.

HEALTH AND ILLNESS POLICY

Parents/guardians will be contacted immediately if a child becomes ill or injured during camp hours. Children who are visibly ill or unable to participate comfortably in activities may not attend camp.

Curious Children Child Care Center will not administer medication during the Summer School Camp program.

PICK UP POLICY

Children must be signed out daily by a parent/guardian or authorized individual listed on this form. Children must be picked up promptly by 5:00 PM.

If a child remains at the Center after program hours and parents/emergency contacts cannot be reached, appropriate authorities may be contacted, if necessary.

BEHAVIOR EXPECTATIONS

Curious Children Child Care Center is committed to maintaining a safe, caring, and respectful environment for all children. Positive behavior, cooperation, and respectful interactions are expected from all campers.

If behavioral concerns arise, The Director will communicate with parents/guardians to work collaboratively toward solutions. Serious or repeated disruptive behavior may result in dismissal from the program.

TUITION AND REFUND POLICY

- Registration is confirmed only after receipt of the required 50% deposit.
- Deposits are non-refundable unless the program is canceled by the Center.
- No refunds or credits will be issued for missed days or voluntary withdrawal.
- Enrollment is limited and subject to availability.
- A minimum enrollment of 10 children is required for the program to operate.

PERMISSIONS AND AUTHORIZATIONS

Emergency Medical Authorization

In the event of an emergency, I authorize Curious Children Child Care Center staff to obtain emergency medical care for my child if I cannot be reached immediately.

Parent/Guardian Initials: _____

Photo Permission

YES, I give permission for my child's photographs/videos to be used in school publications, promotional materials, or social media.

NO, I do not give permission.

PARENT/GUARDIAN AGREEMENT

I give permission for my child to participate in the Curious Children Child Care Center Summer School Camp program and related activities.

I understand that all reasonable precautions will be taken to ensure the safety and well-being of participants. I acknowledge that participation in camp activities involves normal risks associated with children's play and group activities.

I certify that my child is physically able to participate in the program and that all medical and emergency information provided is accurate and complete.

In the event of illness or emergency, I authorize Curious Children Child Care Center staff to obtain emergency medical treatment for my child if I cannot be reached immediately. I understand that I am financially responsible for any medical expenses incurred.

I have read and agree to follow the policies and procedures of the Summer School Camp program, including attendance, behavior, health, and pick-up policies.

I release and hold harmless Curious Children Child Care Center, its staff, volunteers, and representatives from liability arising from ordinary participation in program activities, except in cases of gross negligence or willful misconduct.

I certify that I am the parent/legal guardian of the child listed on this registration form and that the information provided is true and accurate.

I understand that participation in the program requires adherence to Center policies and expectations.

Parent/Guardian Name: _____

Signature: _____ Date: _____

For additional information:

Website: Curious Children Child Care Center

Email: curiouschildren5@gmail.com

Phone: (973) 763-1385