

**HOPE 4 KIDS SUMMER CAMP ADMISSION AGREEMENT**

Summer Camp is for children ages 4 years through entrance into 1st grade (some 3-year-olds may be accepted if s/he is potty trained and able to work well with older children. Please contact the school office at 805-682-2300 x0 for information.

Child's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Gender  M  F  
 Child's Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade in Fall 2017 \_\_\_\_\_ Is your child potty trained?  Yes  No  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Parent/Guardian #1 Name \_\_\_\_\_ Parent/Guardian #2 Name \_\_\_\_\_  
 Parent/Guardian #1 Work Place \_\_\_\_\_ Parent/Guardian #2 Work Place \_\_\_\_\_  
 Parent/Guardian #1 Work Phone \_\_\_\_\_ Parent/Guardian #2 Work Phone \_\_\_\_\_  
 Parent/Guardian #1 Cell \_\_\_\_\_ Parent/Guardian #2 Cell \_\_\_\_\_  
 Parent/Guardian #1 Email \_\_\_\_\_ Parent/Guardian #2 Email \_\_\_\_\_  
 Emergency Contact Person's Name \_\_\_\_\_ Emergency Contact Person's Relationship to Child \_\_\_\_\_  
 Emergency Contact Person's Work # \_\_\_\_\_ Cell \_\_\_\_\_

**My child will attend Hope 4 Kids Summer Camp on the following dates:**

- June 19 – 23 Adventure Camp
  - June 26 – 30 Fantasy & Imagination Camp
  - \*July 3 – 7 Animal Allies Camp
  - July 10 – 14 Maps & Paths Camp (\*closed July 3<sup>rd</sup>)
  - July 17 – 21 Special Places Camp
  - July 24 – 28 Small Worlds Camp
  - July 31 – Aug 4 Hunting & Gathering Camp
  - Aug 7 – 11 Adventure Camp #2
- \*Closed July 4<sup>th</sup> in observance of Independence Day*

**Summer Camp Tuition Rates:**

Full Day = 7:30am-5:30pm  
 Morning = 7:30am-12:30pm; \*Afternoon = 12:30pm-5:30pm  
*\*We close Fridays at 5:00pm*

Registration Fee	\$25 per week
5 or 4 full days	\$225 per week
3 or 2 full days	\$195 per week
5 or 4 mornings	\$195 per week
5 or 4 afternoons	\$155 per week
3 or 2 mornings	\$155 per week
3 or 2 afternoons	\$125 per week

1. Payment of tuition and registration are due prior to the first day of camp.
2. All returned checks will incur a \$50 charge. Returned checks and late fees must be redeemed with cash or a cashier's check the next business day following notification. Two returned checks will automatically put your account on a "cash only" basis.
3. Late pickup fees are \$1 per minute, per child and begin at 12:30pm for morning and 5:30pm for other schedules (5pm on Fridays). Late pickups are assessed automatically and are due immediately. Upon the third occurrence, late fees are tripled and your child's enrollment may be in jeopardy.
4. Lunches not provided by the parent/guardian by 11:00am will be provided by the Program at the rate of \$10 per meal.
5. In case of accidental overpayment, credit will be applied in the amount of the overpayment toward the next week's tuition.
6. A physician's report with information confirming that your child's immunizations and TB test results are completely up-to-date is required **prior to admission**.
7. Children's records will be kept confidential with the following exceptions: licensing agency, teachers, and the Program's administrative staff.
8. The Director of the Program reserves the right to immediately terminate this agreement and discontinue (dis-enroll) any child's participation by giving personal and written notice to the child's Parent(s)/Guardian(s) and refunding the unused portion of any prepaid tuition fees.
9. This agreement is based strictly on weekly enrollment periods. No credit will be given or substitution of days allowed for absences, for the scheduled closure of the Program (including holidays, staff in-service, staff development days, etc.), or for emergency closures.
10. Parent(s)/Guardian(s) acknowledge and agree that the Program shall not be responsible for lost or stolen articles.
11. Parent(s)/Guardian(s) have a right to enter and inspect the Program in accordance with Health and Safety Code Section 1596.857.
12. Parent(s)/Guardian(s) understand that the Program does not administer medication. Exceptions: over-the-counter medication in the form of diaper cream and sunscreen ONLY.
13. Authorized representatives of Community Care Licensing, California Department of Social Services shall have the right to enter and inspect the Program in accordance with Health and Safety Code Sections 1596.852 and 1596.853.

*The undersigned Parent(s)/Guardian(s), agree to hold Missionary Church of Santa Barbara, Inc., DBA Hope Community Church and Hope 4 Kids Preschool & Infant/Toddler Center, its officers, employees, elders, volunteers, and agents harmless from and against any and all liability, loss, expense including reasonable attorney's fees, or claims for injury or damages arising out of my child's participation in this Program, which is not caused by or result from the negligent or intentional acts or omissions of Missionary Church of Santa Barbara, Inc., DBA Hope Community Church and Hope 4 Kids Preschool & Infant/Toddler Center, its officers, employees, elders, and volunteers and agents. I have received and read the Hope 4 Kids Family Handbook and agree to comply with its terms, conditions, and policies. I have received the Hope 4 Kids Emergency Disaster Procedures and Information. The undersigned agrees to these terms and conditions and are financially responsible.*

Parent(s)/Guardian(s) #1 Printed Name \_\_\_\_\_ Parent(s)/Guardian(s) #2 Printed Name \_\_\_\_\_  
 Parent(s)/Guardian(s) #1 Signature \_\_\_\_\_ Parent(s)/Guardian(s) #2 Signature \_\_\_\_\_  
 Program Staff Signature \_\_\_\_\_ Date \_\_\_\_\_