

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 2018 _____ 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 18 – 22 Adventure Camp
- June 25 – 29 Fantasy & Imagination Camp
- *July 2 – 6 Animal Allies Camp
- July 9 – 13 Maps & Paths Camp (*closed July 3rd)
- July 16 – 20 Special Places Camp
- July 23 – 27 Small Worlds Camp
- July 30 – Aug 3 Hunting & Gathering Camp
- Aug 6 – 10 Adventure Camp #2
**Closed July 4th 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 PrintedName _____ Parent(s)/Guardian(s) #2 PrintedName _____

Parent(s)/Guardian(s) #1 Signature _____ Parent(s)/Guardian(s) #2 Signature _____

Program Staff Signature _____ Date _____