



Summer School Age Enrollment Form



Please return this form by June 1, 2018

(Child's Name) _____ (Date of Birth) _____

Will be attending New Day Children's Center Summer School Age Program.

Please circle the days of the week that your child will be attending (there is a two day minimum) Your activity fee is due back with this form to hold your child's spot. We will be holding the summer program at our Franklin Street location. **Spaces are limited** so please return your forms ASAP.

	Monday	Tuesday	Wednesday	Thursday	Friday
Activity fee:	\$24	\$21	\$28	\$56	\$10

Full time Activity fee: **\$140**

Part time Activity fee: \$ _____ (add up the days from above)

Activity fees must be paid in advance, prior to the start of the program.

Please note: Your weekly fees are due on Friday for the following week **whether your child attends or not.**

Fee Schedule

Hours of Child Care: 7:00 a.m. to 5:30 p.m.

5 Full Days: \$175

Daily Rate: \$41

Weekly two day minimum

Fees include your child's breakfast, lunch, and snack. You will be required to bring a bag lunch on field trip days.

Parent Signature _____ **Date** _____

Emergency Contact Numbers: Cell _____ **Work** _____



I give permission for my child _____
to attend: (circle all that apply)

Field trips scheduled on their attendance days

Swimming at the YMCA

Walking field trips

Trips by Citibus to the parks

Signed _____
Date _____