

Longview Chapel Parents Day Out/Preschool

2019 SUMMER CAMP ENROLLMENT FORM

850 SW Longview Road, Lee's Summit, MO 64081

longviewchapelcc.org

816-763-8074 pdo@longviewchapelcc.org

Child's Name _____

Address _____ City _____

State/Zip _____ Home Phone _____

Year Entering Kindergarten _____ Gender _____ Age _____ Date of Birth _____

Father's Name _____ Employer _____

Employer's Address _____ Email _____

Work Phone _____ Cell _____

Mother's Name _____ Employer _____

Employer's Address _____ Email _____

Work Phone _____ Cell _____

PERSONS AUTHORIZED TO ACT FOR PARENTS IN AN EMERGENCY (One emergency contact is required.)

Name _____ Telephone _____

Address _____

Relationship to Child _____

***This enrollment form MUST be accompanied by payment of a nonrefundable enrollment fee of \$20.00. Your child will not be enrolled in the program until we have received all required paperwork and the enrollment fee. Thank you!**

Preschool Summer Camp Classes

Weekly Tuition: \$85 per week

_____ **PreK - Blue Classroom**

Must be 4 years old by July 31 *Must be potty trained*

_____ **Preschool - Green Classroom**

Must be 3 years old by July 31 *Must be potty trained*

_____ **Preschool - Yellow Classroom**

Must be 2 years old by July 31

Summer Camp Sessions

_____ **Session 1: July 9 - July 11**

_____ **Session 2: July 16 - July 18**

Emergency Medical Information

Child's Name _____ Phone _____

Child's Physician _____ Phone _____

Preferred Hospital _____

Does your child have any known allergies or allergic reactions? (circle) Yes / No

If yes, please list allergies and reactions: _____

(Please update this information when/if it changes.)

Does your child have any health concerns (such as asthma, diabetes, seizures, etc.)? (circle) Yes / No

If yes, please explain _____

Has your child had chicken pox? (circle) Yes / No If yes, on or about what date? _____

I hereby give my permission to Longview Chapel Preschool/Parents' Day Out to obtain medical treatment for my child, _____, should the need arise.

Child's Name

Parent/Guardian Signature

Date

Pick-up Authorization

If a child is to go home with someone other than his/her parent or guardian, we must have a pick-up authorization form on file giving written permission for your child to be released to this person. We will allow no exceptions concerning the release of a child to someone not authorized in our files.

Child's Name: _____ Date: _____

Please list any person(s), other than parents, that would be authorized to pick up your child from Longview Chapel Preschool/PDO:

Name of Pick-up Person	Relationship to Child	Telephone
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Thank you for your cooperation. Our main focus is the safety and well-being of our students.

Parent/Guardian Signature

Date

Allergy/Snack Consent

We have children that have many different forms of allergies. During your child's school day, they are given snacks that may be brought in by different classmates. If your child has any food allergies or sensitivities, please provide us with information regarding your child's dietary restrictions and potential reactions. If you do not want them eating the provided snacks, please provide a snack for your child.

If you do choose for your child to eat the snacks provided, please sign below giving your permission. Your child's health and welfare are our priority.

My child, _____, may eat the provided snacks brought into Longview Chapel Preschool/PDO. I understand that if I do not want my child to eat the snacks provided, I may bring in a snack for my child.

Parent/Guardian Signature

Date

Fieldtrip Permission Slip

Sometimes we have rainy days and some very hot days. For those days, we sometimes use the upstairs "Long Hall" for an indoor recess room and other whole group activities. All that is required is a fieldtrip permission slip form!

We sometimes use the "Sunday School area" in the church basement for gymnastics and other group activities, and this area requires a fieldtrip permission slip as well.

Please fill out the form(s) below and return. Thank you!

My child, _____, has permission to use the upstairs "Long Hall" for group activities.

Parent/Guardian Signature

Date

My child, _____, has permission to use the downstairs "Sunday School area" for group activities.

Parent/Guardian Signature

Date

Please return registration form and \$20 enrollment fee to secure summer camp spot. Summer camp tuition is due by June 1, 2019, and is nonrefundable after June 15, 2019.