



# BedRock Preschool

## Summer Camp / Afterschool Application

**Dated Submitted:** \_\_\_\_\_

**Full Name of Student** \_\_\_\_\_ **Nickname** \_\_\_\_\_

Child's Gender  M  F Date of Birth (mm/dd/yyyy) \_\_\_\_\_ Attended our camp last year?  Yes  No

Check here if your child is a sibling of a BedRock student.

How did you hear about us? \_\_\_\_\_

Permanent Address \_\_\_\_\_  
Street Apt City/State Zip

Nationality \_\_\_\_\_ Country of Birth \_\_\_\_\_

Language(s) Spoken at Home \_\_\_\_\_

Parent's Status:  Married  Domestic Partners  Separated  Divorced  Widowed  Single

Child lives with:  Both Parents  Mother Only  Father Only  Other \_\_\_\_\_

**Mother/Guardian Name** \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_

Business Address \_\_\_\_\_ Business Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Father/Guardian Name** \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_

Business Address \_\_\_\_\_ Business Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

**About Your Child** (additional "Getting to Know You" forms will be required for all new students)

1. Has your child attended any previous play group/ preschool / summer camp?  Yes  No  
 If yes, name of location: \_\_\_\_\_

2. Will your child need a transition / phase in period?  Yes  No If yes, speak with director to make arrangements.

3. Please note any special consideration regarding your child (ie: allergies, special education services/ IEP).  
 Request "Attention to Allergies" form (if applicable) \_\_\_\_\_

4. Name of your child's doctor and phone number \_\_\_\_\_

## Summer Camp Program

Reference Tuition sheet for pricing or Call 718.884.0020 to RSVP for a tour.

**Application Fee \$95** Check # \_\_\_\_\_ (waived for existing and returning summer camp students)

**\$ 500** Check # \_\_\_\_\_ (for all new students)

Submit **ONE** check with total amount for July and/or August. **Include tuition for the food program, early bird and night owl if applicable.**

**Check One:**  July Only  August Only  Both July and August  
Amount \$ \_\_\_\_\_ Amount \$ \_\_\_\_\_ Amount \$ \_\_\_\_\_  
Check # \_\_\_\_\_ Check # \_\_\_\_\_ Check # \_\_\_\_\_

**Schedule** (Priority will be given to full day students for both July and August)

Monday – Friday 8:30-5:30pm  Tuesday and Thursday 8:30-5:30pm  
 Monday, Wednesday, Friday 8:30-5:30pm  Others: \_\_\_\_\_

### Add Ons:

Early Bird Drop Off 7:30-8:30am  Night Owl Pick Up 5:30-6:30pm  
 Lunch Program (ages 1 & up) (Check One) \_\_\_Classic Menu \_\_\_Vegetarian \_\_\_Egg/Diary Free \_\_\_Soy/Gluten/Tomato Free

\*\***Included in Tuition:** Music, Yoga, Spanish and Mandarin programs\*\*

## “UPK” and Afterschool Program (Program starting in Sept and ONLY for children turning 4 by Dec 31<sup>st</sup>)

[ ] UPK Only Monday – Friday 8:30-2:50pm  
[ ] UPK + Afterschool Monday – Friday 8:30- 5:30pm  
[ ] Early Bird 7:30-8:30am  
[ ] Night Owl 5:30-6:30pm

## Authorization of Release

The individuals below will be **authorized to pick up your child** other than yourself. Copy of Photo ID must be provided.

Name	Relationship	Home Phone	Work Phone
1	_____	_____	_____
2	_____	_____	_____

## Terms and Conditions

Parents must submit the full amount for summer camp **by April 1<sup>st</sup>**. Students may sign up for one month or both months (July/Aug). Tuition cannot be prorated. There is \$95 application fee and non-refundable \$500 security deposit for all new students. Upon the completion of the exmission form, \$500 deposit will be returned within 3-4 weeks after termination date.

\$1 per minute will be charged for any early drop offs and/or late departures. Any outstanding balance will be deducted from the security deposit upon termination.

**BedRock cannot admit children into the school without a completed medical form.**

If your child falls ill at school we will notify parents and request your child to be picked up asap. **Before returning to school your child must be free of symptoms, including fever, for 24 hours.** In some cases we may require a doctor’s note.

If a child is absent or on vacation for any period of time, we do not issue refunds or “make-up days.”

I hereby give BedRock Preschool permission to use the photograph of my child and/or myself.

Checklist:  Application form  All Tuition checks (Payable to “BedRock Preschool”)  
 Child’s Medical Form  Completed Allergy sheet (if applicable)  Permission to Apply Ointment  
 Getting to Know You Form (for new students)  Received List of “First Day Things to Bring”

Signature of Parent/Guardian

Date of Application