



# Summer Program 2013 Registration Form

For office use only

Cash Receipt # \_\_\_\_\_

Check # \_\_\_\_\_

Amount \$ \_\_\_\_\_

Tuition Express/Procure

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_

- All registration forms must be accompanied by a non-refundable \$55.00 registration fee (includes t-shirt)

----- Indicate the weeks your child will attend by checking your schedule choice for each week -----

		Theme of the week:	5 full	5 half	4 full	4 half	3 full	3 half	2 full	2 half
Wk 1	6/3 – 6/7	<b>Dr Seuss is on the loose!</b> (Toddler/Transitional) <b>Bouncing, Rolling, Tossing, Hitting Balls</b> (Primary-2nd Grade)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wk 2	6/10 – 6/14	<b>Dr. Seuss is on the loose!</b> (All Levels)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wk 3	6/17 – 6/21	<b>Zoo-ology</b> (All Levels)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wk 4	6/24 – 6/28	<b>Zoo-ology</b> (Toddler/Transitional) <b>Ahoy Matey!</b> (Primary-2nd Grade)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wk 5**	7/1 – 7/5	<b>Flower Power</b> (Toddler/Transitional) <b>* Kids in the kitchen</b> (Transitional & Primary K-2) Chef Academy Field Trip: Wed July 3rd, Cost \$15.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wk 6	7/8 – 7/12	<b>Are we there yet?</b> (All Levels)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wk 7	7/15 – 7/19	<b>Are we there yet?</b> (Toddler/Transitional) <b>Peace &amp; Friendship</b> (Primary-2nd Grade)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wk 8	7/22 – 7/26	<b>Nursery Rhymes/Fairy Tales</b> (Toddler/Transitional) <b>Let's Celebrate</b> (Primary-2nd Grade)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wk 9	7/29 – 8/2	<b>Nursery Rhymes/Fairy Tales</b> (Toddler/Transitional) <b>Gold, Silver &amp; Bronze</b> (Primary-2nd Grade)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**\* AN ADDITIONAL \$5.00 PER CHILD in Primary, K-1 WILL BE NEEDED FOR FOOD SUPPLIES.**

\*\*Prorated week: CDSA closed Thursday, 7/4 for Independence Day – **No Extended Day**

\*\*\*Optional Field Trips for K-1 will typically be an additional \$12.00. Trips TBD

High-Touch High-Tech Science, Music, Spanish and Stretch-N-Grow will be a regular part of the summer program.

## Summer Program Schedule Options

5 full days (M - F)	8:15 – 3:30	\$185/week
5 half days (M - F)	8:15 – 12:30 (Toddlers 8:15-12:00)	\$135/week
4 full days (M - F)	8:15 – 3:30	\$160/week
4 half days (M - F)	8:15 – 12:30 (Toddlers 8:15-12:00)	\$120/week
3 full days (M,W,F)	8:15 – 3:30	\$130/week
3 half days (M,W,F)	8:15 – 12:30 (Toddlers 8:15-12:00)	\$100/week
2 full days (T,TH)	8:15 – 3:30	\$95/week
2 half days (T,TH)	8:15 – 12:30 (Toddlers 8:15-12:00)	\$75/week

**Extended Day**

Offered 7-8AM\* and 3:30-6PM.  
Rates based on \$.10/minute charge  
\*based on enrollment needs  
Monthly (June & July) Full Anytime ED Plan available

All summer registrants are encouraged to utilize the convenience of automatic tuition payments through Tuition Express.

Students who early re-enroll for the 2013-14 school year and register for **all nine weeks** of the 2013 CDSA Summer Program, prior to May 1st, are eligible for a 10% discount\* on summer tuition.

\*Discount will not be applied to additions/changes made to registrations after May 1, 2013

~ Please complete both sides of this form ~

# 2013 Summer Program: Student Information

(Please Print)

Child's Name \_\_\_\_\_ Date of birth: \_\_\_\_\_ Age \_\_\_\_\_

School Child Attends \_\_\_\_\_ Please circle t-shirt size (included): 2-4 6-8 10-12 14-16

## Parent/Guardian Information:

Mother's Name \_\_\_\_\_ Daytime phone (\_\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_\_) \_\_\_\_\_

Father's Name \_\_\_\_\_ Daytime phone (\_\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Home phone (\_\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Primary email address \_\_\_\_\_ Secondary email address \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Since many of our program activities are conducted outdoors, we often find it necessary to apply insect repellent or sunscreen to students. Please check the appropriate box to grant or deny permission to apply these products to your child.

I hereby  give  do not give consent for my child to receive insect repellent by program staff.

I hereby  give  do not give consent for my child to receive sunscreen by program staff.

Water activities: I  give  do not give – consent for my child to participate in water activities.

## Health/Allergy Information: *Current immunization records must accompany registration if not on file with CDSA.*

Are all immunizations on file and current with the school?  Yes  No (if no attach copy to this form)

Check if your child has any of the following:

Allergies  Previous serious illness/injury

Nosebleeds  Hospitalization in the past 12 months

Explain \_\_\_\_\_

## Dispensing of Medication:

Does student take prescription medication?  Yes  No

If yes, what medication(s)? \_\_\_\_\_

Will medication(s) need to be dispensed during summer program hours?  Yes  No

Medications that are required must be supplied by the parents and brought to the school in the original container and properly labeled. Dispensing information must include the name of the student, name of the medication, dosage amount, and time the medication is to be dispensed. **A parent must sign the Medication Authorization Form at the front desk before medication will be dispensed.**

Is your child in any special programs at school or does your child have any disability which necessitates special attention or care?

Yes  No (If yes, explain) \_\_\_\_\_

## Physician to contact in case of emergency:

Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Emergency Medical Authorization:

I hereby certify that my child is in good health and may participate in all activities. In case of an emergency, I give my permission for my child to be given emergency treatment at the hospital required by law. Please initial \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

How did you hear about our summer program?  CDSA website  Mailer  Current CDSA Student

Word-of-mouth—who can we thank? \_\_\_\_\_  Publication—which one? \_\_\_\_\_

Other \_\_\_\_\_