

# "Summer at Sand Hills"

Child's Name \_\_\_\_\_ Preferred Name \_\_\_\_\_

Sex \_\_\_\_\_ Birth Date \_\_\_\_\_ \* Currently Enrolled \_\_\_Y \_\_\_N

Week(s) or days attending?

_____	Week 1:	July 6 - 10	\$130.00
_____	Week 2:	July 13 - 17	\$130.00
_____	Week 3:	July 20 - 24	\$130.00
_____	Week 4:	July 27 - 31	\$130.00
_____	Per Diem	(list days below)	\$30.00/per day

\_\_\_\_\_  
\_\_\_\_\_

Costs: Registration Fee \$15.00  
Discounts: 20% sibling discount  
25% church member discount  
Discounts may not be combined.

Parent/Caregiver Names \_\_\_\_\_

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

Home Phone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_ (name)

Cell Phone # \_\_\_\_\_ (name)

Two emergency contact people authorized to pick up your child (other than those listed above)

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

Cell \_\_\_\_\_ Cell \_\_\_\_\_

\*2 year olds: must be three by Dec. 31, 2020, toilet trained, a Toddler Time attendee and / or enrolled for the upcoming Sand Hills Preschool September school year.

IF NOT ALREADY SUBMITTED, PLEASE SEND A COPY OF HEALTH IMMUNIZATION RECORD WITH PAYMENT BY JUNE 1, 2020.

Allergies or medical conditions: \_\_\_Y \_\_\_N

If Yes, explain \_\_\_\_\_

\_\_\_\_\_

In the event of serious injury/illness, I give the Preschool permission to use whatever means necessary to save my child's life.

Parent/Caregiver

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Carpool information**

In addition to the emergency contact names and numbers already provided, please list below the names, addresses and phone numbers of all carpool drivers that have your permission to pick up or drop off your child.

Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Give specific details of carpool arrangement, who will pick up, drop off, etc.

All carpool arrangements are to be made parent-to-parent directly. The school does not arrange for carpools and shall have no further responsibility for these arrangements or for ensuring transportation to and from school if such arrangements are made by you. **WE CANNOT** release your child to drivers not listed by you.

\_\_\_\_\_  
Parent / Caregiver Signature

\_\_\_\_\_  
Date