

PINE GROVE EARLY LEARNING CENTER

School Age Enrollment Contract ~ Summer 2024

Child's Name: _____ Birth Date: _____

Parent's Name: _____ Email: _____

Address: _____ Home #: _____

Cell #: _____ Allergies: _____

Please mark the appropriate information below to indicate your desires for the Summer of 2024 and **return it to the office by March 1, 2024.** ***We request that you return this form even if your child is not attending Summer Camp.*** You have until April 29, 2024 to make changes to your enrollment request for Summer enrollment. After April 29th you will be financially responsible for any time that you sign up for.

Yes, my child will attend Summer Camp

No, my child will not attend Summer Camp

Summer Camp Weeks	Please Check Which Weeks Your Child Will Attend	Days of Attendance (M-F or M,W,F or T, Th)
Week 1 ~ June 17 - 21, 2024 Carnival Craze **Special Day ** June 18 ** Summer Camp Carnival **		
Week 2 ~ June 24 - 28, 2024 When I Grow Up		
Week 3 ~ July 1 - 5, 2024 (Closed July 4th) Happy Holidays		
Week 4 ~ July 8 - 12, 2024 Candy Land		
Week 5 ~ July 15 - 19, 2024 A Splash of Science		
Week 6 ~ July 22 - 26, 2024 Out of This World (Space)		
Week 7 ~ July 29 - August 2, 2024 Treasure Island		
Week 8 ~ August 5 - 9, 2024 Howdy Hoedown ** Special Day ** August 6 ** Summer Camp Hoedown **		
Week 9 ~ August 12 - 16, 2024 Wizardly World		
Week 10 ~ August 19 - 23, 2024 Spirit Week		

Please select the appropriate box and indicate your desired days of attendance.

Please Circle the appropriate response to the following questions:

PGELC has my permission to photograph/video my child and use those images for purposes within the center.....Yes No

PGELC has my permission to photograph/video my child and use those images on the web, handbook and other publications that may circulate outside of the center.....Yes No

PGELC has my permission to apply sunscreen (**supplied by me**).....Yes No
If your child has a sunscreen sensitivity please list what type he/she must use _____

Please Initial that you understand and agree to the following:

___ I will provide my own necessary Covid -19 & daily supplies for my child. (Thermometer, masks, 2 daily snacks, lunch, waterbottle, etc)

___ I will not send my child if he/she is exhibiting any symptoms of Covid-19 or has had exposure to anyone who is suspected to have Covid-19 or has tested positive.

___ I will pick my child up within one hour of being notified if my child requires pick-up for illness.

___ I understand that due to the uncertain nature of Covid-19, the OCC regulations may change without prior notification, that affect the nature of care that PGELC provides.

___ I understand that if there is a suspected or confirmed positive case of Covid-19, PGELC may need to close for a period of time, to be determined by the Maryland Health Department and Office of Child Care.

Parent Signature

Date