STEPPING STONES | EARLY CHILDHOOD CENTER

SUMMER CAMP REGISTRATION FORM 2026

Child's Name (Last)_____ (First) _____

DOB ___/___/____ Home Address _____

City _____State _____ Zip_____

Phone Number _____ Email: _____Male □ Female □

Additional children attending camp:

Child's Name (Last)_____ (First) _____

DOB ___/___/____

SIX-WEEK SESSION ONLY- WEEKLY THEMES ATTACHED

□Mon, July 6th to Fri, August 14th

SELECT THE GROUP for 86th STREET: **Hours of Operation: 7:00am-3:45pm**

□ **TODDLERS –**Born 2024 (Must be 2 by June 30, 2026) **Full day** 8:30am-3:30pm **Half Day** 8:30am-11:30am

□ **EXPLORERS–** Born 2023 **Full Day** 8:30am-3:30pm **Half Day** 8:30am-11:30am

□ **PRESCHOOLERS -**Born 2021-2022 **Full Day** 8:45am-3:45pm **No Half Days**

□ **JUNIORS -**Born 2019 to 2020 **Full Day** 8:45am-3:45pm **No Half Days**

SELECT THIS GROUP FOR 94th STREET:

□ **PRESCHOOLERS –** Born 2021-2022 **Full Day** 8:30am-3:30pm **No Half Days**

Breakfast and Lunch Included!

Days of the Week Select the row.	**Scheduled Time**	**Summer Tuition**	**Extended Morning 7am drop off**	**Please choose the program and write each child's name next to the schedule chosen.**
Five Days a Week Mon, Tues, Wed, Thurs, Fri	FULL DAY	$4200	$325	
Three Days a Week Mon, Wed, Fri	FULL DAY	$3310	$250	
Two Days a Week Tues, Thurs	FULL DAY	$2610	$175	
Five Days a Week Mon, Tues, Wed, Thurs, Fri	HALF DAY	$2950	$325	
Three Days a Week Mon, Wed, Fri	HALF DAY	$2350	$250	
Two Days a Week Tues, Thurs	HALF DAY	$1920	$175	

Non-Refundable Deposit required to register $500 per camper

NO REGISTRATION FEE- DEPOSIT ONLY

Summer Tuition Total $_____

Balance Due May 1st (deduct deposit of $500) $_____

If you are registering more than one child, a sibling discount of 5% will be applied to each additional child's tuition of equal or lesser value. Trip fees are not included. Trips for Toddlers & Explorers will be indoor events. Preschoolers and Juniors will receive trip slip with fees.

***EXTENDED MORNING**: Days and rates may not be modified.*

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CHILD INFORMATION REGISTRATION FORM/CONTRACT 2026

Child's Name (Last): _____ (First): _____ Date of Birth____/____/____

Male □ Female □ Home Address _____ City _____

State_____ Zip Code_____

Child lives with: _____ Number of Siblings: _____

Names and Ages: _____

Legal Guardians are □ Unmarried □ Married □ Separated □ Divorced □ Other _____

Parent/Guardian □Mother □Father □Other	**Parent/Guardian □Mother □Father □Other**
First & Last Name	First & Last Name
Address *(if different)*	Address *(if different)*
Home Phone #	Home Phone #
Work Phone #	Work Phone #
Mobile Phone #	Mobile Phone #
Email	Email
Occupation	Occupation
Employment Address	Employment Address

Additional Information:

Child Physician Name/Contact Number: _____ _____ _____ Medical Conditions, allergies (Explain): _____ _____ Life-threatening allergies □ No □Yes (explain) _____ Epi Pen □Yes □ No Receiving Special Services: □Speech/Language □Occupational □Physical Therapy □SEIT □Special Instruction For how many months? _____ Please attach IEP with enrollment.	<u>Authorized Pick Up and Emergency Contacts (other than Parent/Guardian):</u> Name_____ Relationship to child:_____Phone:_____ Name_____ Relationship to child:_____Phone:_____ Name_____ Relationship to child:_____Phone:_____

Any additional information you would like to tell us about your child: _____

_____

_____

_____

Communication between Parent/Teacher/Stepping Stones

- The Parent acknowledges that they received the current copy of the Summer Camp Policy Book and will comply with all the terms and conditions of the program.

Program Fees/Withdrawals:

- At the signing of this contract, the parents agree to pay an initial $500 non-refundable deposit fee per child. The deposit will be deducted from the total camp tuition. The summer camp tuition balance is to be paid in full by May 1st. A late fee of $50 will be charged after the 5th. If the payment, including late charges is not received by May 5th, Stepping Stones will terminate the Summer Camp Agreement and enrollment of the child(ren).
- Summer Camp tuition will not be refunded or credited due to absences, child quarantine, classroom quarantine, any illnesses, late arrival, late registration, vacations, withdrawal from the program, mandatory government agency shutdown, Department of Health closures, natural disaster and/or any emergency camp closures once camp has begun.
- Last date to withdraw will be May 1st for a summer tuition refund. The $500 deposit is non-refundable. No refunds after May 1st.
- If you would like to change your child's summer camp schedule you may be permitted to do so if there is space available in that program. Policies and refunds will not be changed if there is no availability.
- The parent understands that Stepping Stones may terminate any child's enrollment for any reason but not limited to incomplete immunization compliance, past due tuition payments or behaviors that may pose a threat to the well-being of any children, staff, etc.

Late Pick-up and Early Drop-Off Policy and Fees:

- Summer Camp 2026 will not have any extended hours after dismissal.

Accepted Payment Method Terms and Policy

- Check, Cash, Money Order, ACH (Automatic Deduction from bank), Brightwheel app (Includes Master Card, Visa and Debit options). Please note there may be additional credit card fees charged by Brightwheel.

- Return check or non-payment due to insufficient funds will incur a charge of $30. Nonpayment of returned funds may result in the removal of child(ren) from Stepping Stones and the pursuit of legal remedies for unpaid balances.

Medical Release:

- The parent/s understand that the child must be fully immunized with a completed yearly physical examination form to attend Stepping Stones according to the Department of Health mandated immunizations.
- The parent/s of the above-named child, do hereby authorize and consent the directors, teachers and employees of Stepping Stones to contact the persons named on this form, and to authorize the named physician or his/her associates to render such treatment as may be deemed necessary in an emergency medical treatment for the health of my child.
- The parent/s understand that every effort will be made to notify me immediately in case of such an emergency. In the event the parents or other persons named on this form cannot be reached, the parent consents the directors, and/or teachers and employees to take whatever action is deemed necessary in the judgment for the health of my child. The parent agrees to be completely responsible for all medical expenses, payments of debts, or bills incurred with the injury or any illness of my child.

The parent has seen and read the Summer Camp Parent Book and herein agrees to abide and comply by all the policies and procedures contained in the book.
THE UNDERSIGNED HAVE READ AND UNDERSTAND THIS AGREEMENT, and by signing this Agreement, all parties agree to all of the above terms, conditions and policies, including financial responsibilities for child care provided. The Provider is responsible for providing all parties a copy of this signed Agreement.
Legal Guardian/Parent Name: (Print) _____
Signature_____

Social Media/Photo Release:

- I give Stepping Stones permission to take photographs of my child throughout the school year in the activities they participate. I give Stepping Stones permission to use these photographs of events, lesson, children at play, trips, etc. to be used on the school website, school social media accounts, Brightwheel app, etc.

Legal Guardian/Parent Name: (Print) _____
Signature_____

Nature Walk

- I give Stepping Stones permission to take my child on nature walks and periodic walking trips in the neighborhood. (Walking rings will be used for younger students.)

Legal Guardian/Parent Name: (Print) _____

Signature_____

Park Permission

- I give Stepping Stones permission to take my child to the park on Colonial Road and 84th Street if my child attends the 86th Street location and to the park on Shore Road and 95th street if my child attends the Next Step location.

Legal Guardian/Parent Name: (Print) _____

Signature_____

For Summer Camp

- I give Stepping Stones permission to reapply sunblock during the day with the sunblock provided labeled with my child's name.

Legal Guardian/Parent Name: (Print)_____

Signature_____

Date _____