

Redeemer Lutheran Early Childhood



Summer Sessions: 2018

Dates	Times	Theme	Classroom	Teacher
June 11-15	8:30a.m. -12:00p.m.	Around the Pond	304	Miss Stahl
June 25-29	8:30a.m. -12:00p.m.	Let's Explore Space	304	Miss Kahrs
July 16-20	8:30a.m. -12:00p.m.	At the Zoo	302	Miss Clark

Child's Name _____ Date of Birth _____

Age on June 1st, 2018: 3yr. (potty trained) 4yr. 5yr.

Address: _____

Medical Information

List any allergies Redeemer should be aware of:

List any medical conditions Redeemer should be aware of:

Contact Information

Mother's Name: _____ Phone Number: _____

Father's Name: _____ Phone Number: _____

Home phone number: _____

Emergency Contact Information

Emergency Contact: _____ Phone Number: _____

Emergency Contact: _____ Phone Number: _____

In case of injury or sudden illness, I request that this individual be called first: _____

I hereby give authority to any hospital or doctor to render immediate aide as might be required at the time for his/her health and safety. It is understood by me that the expense of this service will be accepted by me.

Parent Signature

What to Bring to School

Children are asked to bring a water-bottle, snack, and an extra change of clothes in their backpack each day. We will provide everything else!

Please mark all sessions that your child will be attending.

June 11-15 _____
June 25-29 _____
July 16-20 _____

Upon receiving this completed application, we request a \$100 program fee for each session. This fee will secure your child's spot and is refundable if the session is unexpectedly cancelled. We cannot consider your child for enrollment without the program fee. Thank you.

I hereby certify that I, _____, (Name of Parent/Guardian), have read and understand the summer session registration form. My signature at the bottom of this form indicates my willingness to uphold the rules and regulations of the program.

(Parent/Guardian Signature)

Date