



Eliza Corwin Frost
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Bronxville, New York 10708
(914) 779-4852

Application
For Summer Fun 2018
for Ages 2 (by June) through 5 years

Please complete the application in its entirety. Completed applications and a non-refundable application fee of \$50 (payable by check or Money Order payable to ECF) are required. Please submit both to the Main Office.

Applicant Information

Is the applicant a: Current enrollee Class _____
 Future enrollee Program _____

Child's Name _____ Gender _____ Date of Birth ___/___/20__

Home Address _____ Home Phone _____

How did you hear about our program? _____

If new to ECF, have you received a tour of the program? No Yes When? _____

Contact Information

Parent/Guardian 1 Information
Primary Contact

Parent/Guardian 2 Information

Relation to Applicant _____ Relation to Applicant _____

Name _____ Name _____

Cell Phone _____ Cell Phone _____

Email Address _____ Email Address _____

If employed: If employed:

Employer _____ Employer _____

Position _____ Position _____

Business Phone _____ Business Phone _____

Background Information

Please describe your child's experience and length of time in programs with groups of other children who are similar in age_____

Sibling and their ages:_____

Does your child have any allergies or other medical conditions that we should be aware of? Please explain_____

Does your child have any special needs any specials needs characteristics that we should be aware of? Please explain_____

Application for enrollment in the ECF Summer Fun Program

- Sessions will be created based on enrollment and may be modified based on interest.
- All sessions will run from **Mon. - Thurs. from 9:00-11:30** unless otherwise noted.
- Weekly cost for all sessions is \$300 per week which includes a t-shirt, all activity costs and snack.

Please check all that apply:

- _____ Week 1 (June 11 - June 14)
- _____ Week 2 (June 18 - June 21)
- _____ Week 3 (June 25 - June 28)
- _____ No camp week of July 4th
- _____ Week 4 (July 9 - July 12)

The above indicates my preferred dates for the ECF Summer Program 2018. If enrolled, I will be responsible for all tuition fees.

Signature_____ Date_____

\$50 non-refundable tuition deposit due at time of enrollment.