

# Manheim BIC 2019 Preschool Day-Camp Registration and Agreement

Manheim BIC Church, 54 North Penryn Road, Manheim PA 17545  
Mrs. Marilyn Hoffsmith, Director Office Phone: 665.2133 ext. 208

## Registration (child must have turned three by September 1, 2018)

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parents' Names \_\_\_\_\_ Day Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Please register my child for: \_\_\_\_\_ June 11,12,13 \_\_\_\_\_ June 18,19,20 \_\_\_\_\_ June 25,26,27

\_\_\_\_\_ July 9,10,11 \_\_\_\_\_ July 16,17,18 \_\_\_\_\_ July 23,24,25

Tuesday, Wednesday, Thursday, 9:00 am—12 noon; Cost is \$45 per week or \$250 for 6 weeks; Snack is provided.

## Payment Agreement

### **Please Initial:**

The fee for campers is \$45.00. A deposit of \$45.00 is required with the registration and will be credited towards the first week of day-camp.

I understand there will be no refunds or reductions of tuition for reasons of absence, withdrawal, illness or dismissal. Full tuition is due even if my child does not attend all the days of the session.

Registration will not be considered complete and we will not hold a space for your child until we have your child's completed forms and registration fee.

## Program Agreement

### **Please Initial:**

I understand that my child will be picked up by 12:15 pm. I understand that upon daily pick up from camp a parent/guardian must show their "Manheim BIC Camp Pick-up Pass" that will be provided in the welcome packet. If someone other than a parent/guardian (i.e. babysitter, grandparent, etc.) will be picking up my camper I must provide them with a "Pick Up Pass" in order to take my child from camp.

I also agree to meet with the camp director to discuss any special needs, which may affect my child's involvement in the program. Should the camp director advise further professional help with which I disagree, or if it is determined that the program is unable to meet my child's special needs, I understand that the director has the right to ask for immediate termination of this agreement.

I grant permission for my child to: Use all program play equipment and materials, participate in all program activities and leave the premises for walks/field trips.

Please advise camp staff, IN WRITING, of any prescription medication or special dietary needs to be taken during the day. Medications should be in original container and have specific instructions or dosage. I grant permission to staff to apply first-aid if needed.

## Liability Waiver

I, the undersigned, on behalf of myself, spouse and children, do hereby release Manheim BIC and employees of Manheim BIC from any liability for any bodily injury and damage to personal property of me and/or my children sustained while participating in camp at Manheim BIC.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_