

After School \_\_\_\_\_

Start date \_\_\_\_\_

Summer Camp \_\_\_\_\_

## Laurel Oak Kids

### After School Child Care and Summer Camp

Name \_\_\_\_\_

Home address \_\_\_\_\_

Birthday \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Father's name \_\_\_\_\_

Place of employment \_\_\_\_\_

Work phone number \_\_\_\_\_

Cell phone number \_\_\_\_\_

Email \_\_\_\_\_

Mother's name \_\_\_\_\_

Place of employment \_\_\_\_\_

Work phone number \_\_\_\_\_

Cell phone number \_\_\_\_\_

Email \_\_\_\_\_

Child's physician \_\_\_\_\_ Phone number \_\_\_\_\_

Emergency contact \_\_\_\_\_ Relation to the child \_\_\_\_\_

Phone number \_\_\_\_\_

Does your child have any health issues we need to be aware of? (ex. allergy to bee stings, asthma, allergies to foods, etc.) \_\_\_\_\_

How many days a week do you need childcare? \_\_\_\_\_

Do you wish for your child to begin their homework? \_\_\_\_\_

Designated people to pick up your child \_\_\_\_\_

Laurel Oak Kids

A Division of Abbotts Creek Child Care Inc.

After School Care and Summer Camp

My child, \_\_\_\_\_, has permission to ride in a vehicle provided by the Laurel Oak Kids after school and summer camp program.

My child is covered under our family insurance policy and I will not hold Laurel Oak Christian Church or Laurel Oak Kids or their employees liable/responsible for injury or accident should occur under their care. I agree to pay any medical expenses, if an accident should occur, to the attending physician or hospital. If the parents cannot be reached, you have my permission to obtain medical treatment.

Tuition for this program is due in advance every Monday, you will receive a statement notifying you of the fee each month. Payment is expected to be paid weekly unless you have set up a different payment plan. If your child is not in attendance, you are to pay full tuition fee. We staff according to numbers and our staff needs to be paid. With this arrangement, we can better budget staff, salaries, supplies, and special events in order to provide quality care for your child.

We provide all day care of those days that schools are closed, except for major holidays. If your child comes on these days an extra charge is added to tuition.

I have read the record of fee. I understand thus us a consistent charge or "set" fee. My child will attend \_\_\_\_\_ days per week and I agree to pay the "set" fee. You do pay for holidays and days your child is absent.

Laurel Oak Kids has a website at [www.laureloakkids.com](http://www.laureloakkids.com) and we update information and pictures regularly. This allow parents to be better connected to their child's daily activities and hopefully answers frequently asked questions.

Please indicate below which applies to you and your child

\_\_\_\_ I understand that my child's photograph, and/or their name may be used on the Laurel Oak Kids website throughout their time at Laurel Oak Kids.

\_\_\_\_ I do not agree to my child's photograph, and/or their name may be used on the Laurel Oak Kids website throughout their time at Laurel Oak Kids.

I acknowledge reading the above and agree to all terms

Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_