



PRESCHOOL SUMMER FUN 2020



Dates: Session I: 6/1 – 6/5
Session II: 6/8 – 6/12



Time: 9:00 A.M. until 12:00 P.M.



Ages: 3 years (as of 9/1/2020) to Kindergarten Age
*Children must be toilet trained.



Price: \$225 per Session (\$100 due at registration,
remaining balance due on or before Friday, May 15th)



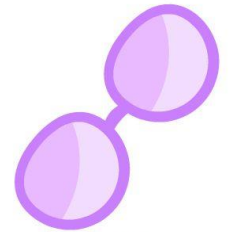
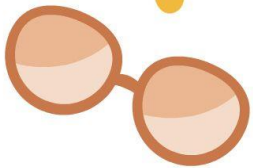
- ❖ Each Summer Fun day will include outside play, art, crafts, music, stories and more.
- ❖ Morning snack and juice/water will be provided daily.
- ❖ Before dropping your child off, please apply sunscreen and insect repellent.
- ❖ Return your registration form and deposit as soon as possible to ensure a spot.



Session I (Monday, June 1st – Friday, June 5th) \$225.00

Explorer Week and All Things Adventurous

Come on an adventure with us! Each day we will travel to new locations and different times; from the crevasses of an ant's tunnel to the depths of the ocean and the tops of the jungle trees. We will visit the dinosaurs of the past and aliens of the future. Let's explore!



Session II (Monday, June 8th – Friday, June 12th) \$225.00

Pretend Week and All Things Make-Believe

Do you dream of being a princess in the Royal Court or a pirate on a hunt for gold? Maybe a detective solving a mystery or a member of the Rescue Squad? We will use our powers of make-believe to transform each day into someone new. Come use your imagination with us for this week of awesome pretend play!



CREATIVE SCHOOL PRESCHOOL SUMMER FUN 2020

A registration form must be filled out for **EACH STUDENT** being enrolled in the Summer Fun program. Students enrolled at the Creative School during the 2019-2020 school year must still fill out this form to fully register. In addition to this form, all parents must submit an updated medical form for each child. **If a current medical form is on file at the Creative School, please make a note in the space below:**

[] **check here** if medical form is on file at the Creative School. If this is the case, you **do not** have to turn in another copy. However, this registration form must still be filled out and turned in along with deposit to register.

CHILD'S NAME: _____ PREFERRED NAME: _____

CHILD'S ADDRESS:

_____ STREET CITY ZIP CODE

_____ DATE OF BIRTH AGE AS OF 9/1/2020 Boy _____ Girl _____

_____ FATHER'S NAME

_____ MOTHER'S NAME

_____ CELL PHONE #

_____ CELL PHONE #

_____ FATHER'S EMPLOYER

_____ MOTHER'S EMPLOYER

_____ BUSINESS PHONE #

_____ BUSINESS PHONE #

EMERGENCY CONTACT (Please furnish two names other than the parents.)

Contact #1 _____

Address _____ Cell Phone _____

Employer _____ Business Phone _____

Home Phone _____

Contact #2 _____

Address _____ Cell Phone _____

Employer _____ Business Phone _____

Home Phone _____

AUTHORIZATIONS

I. In the event that I (we) cannot be reached to make arrangement for emergency medical attention, I (we) authorize Creative School to take my child to:

Doctor: _____ Address _____

Phone: _____ Standard practice in an emergency is to transport the child to the nearest hospital. We use Texas Health Presbyterian Hospital unless specified otherwise.

II. These persons are allowed to pick up my child at Creative School. (List name and phone number):

1. _____

2. _____

3. _____

(Note: If your child's normal transportation is unavailable, please send a note to the school office with the name of the person who will be picking up your child. We will check I.D.)

III. I have read and agree with the statements above and to the registration policies listed on the attached information sheet.

Parent Signature

Date

Open Registration begins February 8, 2020.

I am signing my child up for:

Session I - June 1st – June 5th *Explorer Week and All Things Adventurous* _____

Session II – June 8th – June 12th *Pretend Week and All Things Make-Believe* _____

Tuition is non-refundable, but we will shift sessions if space is available.

Deposit of \$100 due with Registration Form to secure placement.

Remaining balance of \$125 is due on or before Friday, May 15th

For Office Use Only:

Total Amount Due: _____

Date: _____ Amount Paid: _____ Check Number: _____

Date: _____ Amount Paid: _____ Check Number: _____