



# Little Red Summer Enrichment Program

July 5th - August 12th

Weekly Themes

Summer Pricing

**\*\* Beach Party \*\* Amazing Art \*\* Silly Summer \*\***  
**\*\* Going Green \*\* Creative Chefs \*\* Sports Week \*\***

Full time 5 days

9am - 3pm

\$120.00 per week

3 days

\$100.00 per week

Part time available

AM or PM \$85.00 per week

# 2018 Summer Program Registration and Emergency Form

Date: \_\_\_\_\_

Child's Name \_\_\_\_\_

Commonly Called \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

**If parents are divorced or separated, please specify custodial parent**

\_\_\_\_\_  
Student's School \_\_\_\_\_

Mother/Father/Guardian \_\_\_\_\_

Relationship to child \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Mother/Father/Guardian \_\_\_\_\_

Relationship to child \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

## Special Needs:

If your child has special needs, please tell us about them. Please be specific.

\_\_\_\_\_  
Special Needs \_\_\_\_\_

\_\_\_\_\_  
Medical Needs or Concerns \_\_\_\_\_

\_\_\_\_\_  
Food Allergies \_\_\_\_\_

\_\_\_\_\_  
Other Needs or Concerns \_\_\_\_\_

## Emergency Contacts:

Please list two relatives or nearby neighbors that you have notified and that agree to assume temporary care of your child if you cannot be reached:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_  
(Street) (City) (State) (Zip)

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_  
(Street) (City) (State) (Zip)

\*\*\* extra weeks available depending on enrollment \*\*\*

7/31 - 8/4, 8/7 - 8/11