



The New Bairn School

SUMMER REGISTRATION FORM 2025

The New Bairn School's Summer Program will run from **June 30, 2025 - August 22, 2025** with **July 4, 2025** being our only holiday.

We will be closed from **August 25, 2025 - August 29, 2025** in order to prepare for the opening of our academic year. The Summer Program's tuition will be due on June 30th and August 1st. Tuition payments must be made timely. Your tuition includes any disaster days, "sick" days, COVID-19 related matters, all holidays, and any vacation time. You are obligated to pay for the month regardless of the number of days your child has attended. There will be no substitutions, alternative dates or switching of days allowed if your child misses school for any reason.

Summer Program Registration will be open and prioritized to *ALL New Bairn School children and their siblings*. Please fill out the required information below and return it to the office **no later than** February 26th. **There is no registration fee for currently enrolled students in our program. Registration fees are for students that are entering the program only, including older siblings.**

Summer enrollment must be for 3, 4, or 5 days a week, and your child must enroll for both July and August. There will be no partial enrollment program this year.

(Withdrawal from school without 30 days notification will result in a fee equal to an additional month's tuition.)

Child's Name: _____ Age: _____ Birthdate: _____
Address: _____ City: _____ Zip: _____ Phone: _____
Mother's Name: _____ Occupation: _____
Mother's Business Address: _____ Phone: _____
Father's Name: _____ Occupation: _____
Father's Business Address: _____ Phone: _____
Person to be contacted if parents cannot be reached: _____
Address: _____ Relationship: _____ Phone: _____
Pediatrician Information: _____ Phone: _____

Circle the following:

Morning Session: 7:00 a.m. - 11:45 a.m.

Full-Day: 7:00 a.m. - 6:00 p.m.

Circle the days that your child will be attending our program:

M T W TH F

Parent's Signature: _____

Date: _____

* In the event that a physician cannot be reached, The New Bairn School has my permission to seek emergency treatment at a hospital.

A NON-REFUNDABLE APPLICATION AND INSURANCE FEE OF \$90.00 FOR EACH APPLICANT MUST ACCOMPANY THIS FORM. EACH CHILD MUST HAVE THEIR OWN APPLICATION. REGISTRATION FEE IS VALID FOR START DATE INDICATED ON THIS FORM.

Brightwheel Confirmation Code: _____

Date Paid: _____

Start Date: _____