

Registration Dates
 Current Families: Feb 23, 2026
 2026-27 New Registered Families: March 2, 2026
 Public: March 16, 2026

2026 Summer Camp Registration (Tots)

Child's Name (First and Last)	Preferred Name to be Called	Date of Birth	Gender
Home Address	City	State	Zip
Parent/Guardian Name:	Parent/Guardian Email Address (Please list primary email to be used):		
Parent/Guardian Phone (Please list primary phone number to be used):		Parent/Guardian Additional Name and Phone (if applicable):	
Emergency Contact Name (Please name person other than parent listed above):			Emergency Contact Phone:
Allergies: Please list any applicable allergies <u>AND</u> any medically approved treatment plan (if applicable): _____ _____ _____			

Eligibility for Summer Camp in the Tots Classroom: Currently Enrolled Students: Children enrolled in our Tots class during the 2025-2026 school year will be assigned to the Tots classroom in the summer. **Newly Enrolled Students:** Children enrolled in our Two class(es) for the 2026-2027 school year are eligible for summer camp and will be assigned to the Tots classroom in the summer.

Week	Theme	Date	Register (X)	Tuition Rates (please circle preference)		
				M-F	MWF	TTH
1	Under the Sea Adventures	June 1-5	_____	\$250	\$150	\$100
2	Camp Trailblazers	June 8-12	_____	\$250	\$150	\$100
3	Little Gardeners	June 15-19	_____	\$250	\$150	\$100
4	Stars, Stripes and Smiles	June 22-26	_____	\$250	\$150	\$100
5	Splash of Color	July 6-10	_____	\$250	\$150	\$100
6	Bible Heroes Unite	July 13-17	_____	\$250	\$150	\$100
7	Super Scientists	July 20-24	_____	\$250	\$150	\$100
8	Things with Wings	July 27-31	_____	\$250	\$150	\$100

I am registering my child for (#) _____ week(s) of Summer Camp at Lancaster Preschool. I understand that my enrollment is pending until I have submitted a completed registration form and received confirmation of placement. Lancaster Preschool has our permission in an emergency to obtain the medical services of a physician for which we, the parents, will assume financial responsibility. We agree that Lancaster Preschool, Board of Directors, Teachers and Administration are hereby released from any claims or financial responsibility arising out of any injury that may occur in connection with the operation of the school, or from any illness that may be contracted by the child during their period of enrollment.

I agree that by registering my child for Summer Camp at Lancaster Preschool, I am financially responsible for the payment due in accordance with the tuition rates listed on page 1 of this registration form (ex: 1 week = \$250, 2 weeks = \$500, etc). **At time of registration, I understand that payment may be remitted in full or in two installments as follows: payment for Weeks 1-4 due on or before June 1; payment for Weeks 5-8 due on or before July 1.** Refunds are not available for summer camp registration and submission of this form is an agreement to pay for the weeks I am requesting for my child regardless of attendance. Class sizes are limited, and spots are filled on a first-come, first-served basis.

Payment may be made via personal check, cash or credit card (fees apply). Families registered for the 2025-2026 school year who have an active Brightwheel account set up with Lancaster Preschool may also pay via Brightwheel. To pay via Brightwheel, please notate below and you will be billed.

Payment Options (please choose one)

One-time payment _____

Two installments (payment #1: Weeks 1-4 due June 1 and payment #2: Weeks 5-8 due July 1) _____

Check here if you would like to be billed via Brightwheel. _____

If you are registering for multiple weeks and your personal circumstances require an alternative payment plan, please contact Emily Murphy at emurphy@lancasterps.org. All conversations regarding payments and any alternative arrangements are kept confidential.

Carpool Pick Up/Dismissal

My child may be dismissed/released to the Parent/Guardian and Emergency Contact listed on page 1 of this registration form. The following individuals are also authorized to pick up my child from Lancaster Preschool. If any individual not listed on this form will pick up my child, I will notify the School Office and understand that this individual will be asked to provide photo identification.

Name: _____ Phone: _____

Name: _____ Phone: _____

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

Office Use Only

Registration Received ____/____/____ Initials _____ Current Family _____ New Family _____

Registration Details: One Payment _____ Two Payments _____

Total Due \$ _____ Amount Paid \$ _____ Balance Due \$ _____

Payment #1 _____ CK CA CC BW Payment #2 _____ CK CA CC BW

Assigned to _____ classroom Registered for Week(s) 1 2 3 4 5 6 7 8

Confirmation Sent ____/____/____