

Enrolled

2022 Summer Registration

Child's Name		Initial for each week of attendance
Date of Birth and Age		
Week 1	June 1-3	<input type="text"/>
Week 2	June 6-10	<input type="text"/>
Week 3	June 13-17	<input type="text"/>
Week 4	June 20-24	<input type="text"/>
Week 5	June 27-July 1	<input type="text"/>
Week 6	July 5-8 (Closed 4 th)	<input type="text"/>
Week 7	July 11-15	<input type="text"/>
Week 8	July 18-22	<input type="text"/>
Week 9	July 25-29	<input type="text"/>
Week 10	August 1-5	<input type="text"/>
Week 11	August 8-12	<input type="text"/>
Week 12	August 15-19 (closed 20 th)	<input type="text"/>
Week 13	August 22-26	<input type="text"/>

The undersigned agrees to contract childcare with Every Child Is Special for the 2022 Summer Adventure. During the duration of the contract, reservation for the child will be secured. Rates are not prorated. The only possible exception to this policy may be due to profound health-related absences (accompanied by a physician's note). Cash refunds do not apply. All issues pertaining to credits/prorated fees are subject to Every Child Is Special Director's approval. The patron must understand that in the event of absences during the program hours and activities, the patron is responsible for time reserved, not actual time spent, at the program. **Policy Change: After May 15th**, weeks can be added but not subtracted. The weeks are Non-Transferable and Non-Refundable. Families will be expected to pay for the weeks selected.

I have read and understood this policy. **Initial** _____

I will make all payments on the first Monday of each week through the ECIS auto-bill system that ProCare and Intuit provide. All patrons must have a valid credit card or ACH account on file. We will not accept checks or cash payments. I understand that payments will be pulled on the Monday of care. There may be a delay in the post of the payment to your bank account. Please understand there will be an additional **\$6.00 per week** for swim days only on the weeks we go. **Initial** _____

All participants must bring their snack & lunch on Field Trip Days. Please **do not pack soda or candy** in your child's lunch as we are part of the USDA food program, and we are not allowed to let children eat these items at the facility. Please have lunches in a labeled container/lunchbox with your child's name on it (no plastic bags). Lunches may be placed in the cooler when children arrive at the center. If your child forgets a lunch, we will provide one for them for an additional cost of **\$5**. **Initial** _____

We are a Peanut Free Facility! Please do not pack peanut products in your child's lunch.

I understand that two bottles of spray/lotion sunscreen must be provided per child when signing up for the summer program. The sunscreen must be a 16-ounce bottle or larger. It must contain at least SPF 30 and must not contain DEET. The children are responsible for applying their sunscreen lotion starting at age 6 (with supervision). The staff may only apply sunscreen to the child's face and on the shoulders. Another child will assist with sunscreen application on other parts of the body with staff supervision. Staff assistance would be needed when applying sunscreens for preschool-age children (ages 3-5). **Initial** _____

Parking is available on the upper level of the building. We ask that you switch off your vehicle and walk your child during drop-off or while signing them in. Never leave any other children unattended in your vehicle. We also ask that no one parks on the curb area. The above actions are requested for everyone's safety. **Initial**_____

Children must be signed in and out of the program each day. The sign-in area is located at the front entrance of the ECIS building. We use the sign in & out form as well as sheets. You can sign in electronically from your mobile device for your child. **Initial**_____

Summer Adventure hours of operation are from 6:00am-6:00pm. Unless extended hours have been arranged for your child. **Initial**_____

If a child has not been signed out by 6:00, a \$5.00 late charge will be levied for every 5 minutes after the closing time. For example, at 6:05, there will be a \$5.00 fee added to the standard fees.

Suppose a child has not been picked up within 30 minutes, and we cannot contact the emergency contact. In that case, our policy is to contact Child Care Services (DSS) and the Rapid City Police Department. **Initial**_____

Please do not bring your child to ECIS if he/she is ill, has a contagious condition, has been on antibiotics for less than 24 hours, has diarrhea, vomiting, a fever of 101 or higher, an eye infection, rash with fever or severe itching, lice or nits, discharge from the eyes or ears, colored discharge from the nose, or any other symptom that indicates illness or potentially contagious condition. A child who is brought to the program with any of these conditions or symptoms cannot be admitted. Parents will need to pick up their child. Suppose any of these symptoms develop after a child has been admitted to the program. In that case, the parents will be called and informed of their child's symptoms and will need to make arrangements to pick up their child within one hour of being notified. **After being sent home for any of these conditions or symptoms, a child may not return for 24 hours.** **Initial**_____

I, guardian of the below-listed registrant, a minor, agree that the registrant and I will abide by the rules of the ECIS program. In accepting the contractual terms of this agreement, I recognize the possibility of the physical injury that may result. At the same time, my child participates in the program and its field trips and/or activities. I hereby release, discharge and/or otherwise indemnify their employees and associated personnel (volunteers), to include the owners of the facilities/equipment utilized for the program, against any claim of personal injury or death or any other claim made by or on behalf of the registrant as a result of my child participating in the program and/or being transported to and from the same. **Initial**_____

I give permission for the ECIS program to transport my child on field trips. **Initial**_____

I _____ agree to contract care at ECIS Summer Adventure for _____ (child's name). I understand the terms of agreement.

Parent or guardian Signature: _____

Date: _____

- The registration fee is \$5.00 per week of attendance if signed up for fall school-year program. \$10.00 per week of attendance if only coming for summer this fee is nonrefundable and nontransferable.
 - Registration Fees must be paid at time of enrollment or can be billed if currently enrolled.
- Cost per Week: \$170 (We do offer a second child Discount)**