

**NEW CITY KIDS SUMMER CAMP APPLICATION**  
**1<sup>ST</sup> -2<sup>ND</sup> GRADE**  
**4 WEEK PROGRAM: JULY 10<sup>TH</sup>, 2017-AUGUST 4<sup>TH</sup>, 2017**

\*Due with \$50 deposit (counted toward Week 1 cost) and proof of income.

Child's Name: \_\_\_\_\_ Gender (circle): M or F Age: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade in Sept. 2017: \_\_\_\_\_ School: \_\_\_\_\_

Child's Address (street, apt. #, city, state and zip code):

\_\_\_\_\_

**Mother**/Guardian Name: \_\_\_\_\_

Mother's Address (if different than child's): \_\_\_\_\_

Cell ph.#: \_\_\_\_\_ Home ph.#: \_\_\_\_\_ Work ph.#: \_\_\_\_\_

Work name and address: \_\_\_\_\_

Email: \_\_\_\_\_

**Father**/Guardian Name: \_\_\_\_\_

Father's Address (if different than child's): \_\_\_\_\_

Cell ph.#: \_\_\_\_\_ Home ph.#: \_\_\_\_\_ Work ph.#: \_\_\_\_\_

Work name and address: \_\_\_\_\_

Email: \_\_\_\_\_

**Emergency Contacts:**

Name:

Relationship to child:

Cell ph.#:

1. \_\_\_\_\_

2. \_\_\_\_\_

Persons Authorized to pick up child **in addition** to parents/guardians:

\_\_\_\_\_

Walking permission: My child is allowed to walk home (circle):      Yes      No

**Medical Information:**

Child's Doctor: \_\_\_\_\_ Ph.#: \_\_\_\_\_

Doctor's Address: \_\_\_\_\_

Allergies (including food): \_\_\_\_\_

Medications child takes: \_\_\_\_\_

Health issues/activity restrictions: \_\_\_\_\_

Please check the boxes that apply:

- My child is in good physical health and can participate in normal program activities.
- My child's immunization records are up-to-date and are on file with the child's school.

➤ Do you currently receive Urban League assistance (circle):      Yes      No

\*\*Please bring any relevant Urban League paperwork with this application

**Weeks of Camp:** I am committing to having my child attend at least 3 of the 4 weeks of summer camp programming. Please note that Week 2 programming (July 10<sup>th</sup>-14<sup>th</sup>) is a stand-alone day camp for 1<sup>st</sup>-4<sup>th</sup> grade students only. 5<sup>th</sup>-8<sup>th</sup> grades will resume programming on July 24th

Initial to agree: \_\_\_\_\_

**(Optional) Extended Day Program:**

We are offering an additional Extended Day component to our summer camp. It will take place every day from 3 PM to 5:30 PM. It will include snack for the children and additional classes. This program is on a first-come, first-served basis, and **will cost an additional \$50 a week.**

- I would like to enroll my child into the optional extended day program. I understand there is limited availability in this program, and my child is not guaranteed a spot in the extended day.

I understand that my child must be picked up every day by 5:30 PM. After repeated failure to do so I will incur a \$10 late fee for every 20 minutes that I am late to pick up my child. My repeated failure to pick up my child on time may result in the removal of child from the Extended Day portion of the camp.

Initial to agree: \_\_\_\_\_

## **Parent/Guardian Permission**

### **Drop off and pick up**

I give my child permission to attend New City Kids Summer Camp, Mondays-Fridays, July 10th - August 4th. I understand that transportation is not provided and that children are to arrive no earlier than 8:30am and to be picked up at 3:00pm. *I understand that my child will not be released to anyone other than the persons listed as authorized to pick up.* **For every 20 minutes that a child is in New City Kids' care after dismissal, a \$10 late fee will be charged.**

### **Field Trips**

I understand that one day per week, children will attend a field trip. Parents will be notified with the details on each trip during the week. I understand that my signature on this permission slip allows my child to attend field trips. **Should I choose not to allow my child to attend a field trip, I will inform New City Kids staff and keep my child home on that day.**

### **Photos**

New City Kids staff occasionally takes pictures/videos of its programs and children. I give New City Kids permission to use these photographs or videos in its website or promotional materials such as brochures and flyers. **If this is unacceptable, please submit a written letter stating your wishes for your child's photograph/video not to be used.**

### **Cost**

The weekly rate for Summer Camp is \$50 per child either in cash or money order. **Payment is due for Week 1 at the time of registration, for Week 2 on July 10<sup>th</sup>, for Week 3 on July 17<sup>th</sup>, and for Week 4 on July 24<sup>th</sup>.** Late fees will be added to payments made after the due date. . **Any payment later than 1 week will result in removal from our programming, and the spot will be given to a child on the waiting list.** If your child is enrolled in the Extended Day Program, there will be an additional cost of \$50 per week.

**Behavior Expectations/Discipline Policy:** We have a warm and loving environment at New City Kids and expect children to be respectful to staff and peers. In order to maintain a safe environment, we use the following discipline policy. The consequences for misbehavior are:

1. First incident - Verbal warning from teen or adult staff.\*
2. Second incident - Time out in foyer, while meeting with adult staff to discuss the problem. \*
3. Third incident - Time out in foyer, accompanied by a call home to parent or guardian.
4. Fourth incident - Suspension for a period of days to be decided by the Director.
5. Continued incidents - Removal from program.

\*If the incident is serious enough, a staff member may proceed directly to Step 3 &/or 4 (particularly if the child's behavior endangers him/herself or others).

I have read the behavior expectations and the discipline policy and agree to these expectations.

**Parent/Guardian Signature:** \_\_\_\_\_

### **Medical authorization:**

In the event that I cannot be reached during an emergency situation, I authorize New City Kids staff to make emergency medical decisions on my behalf.

**Parent/Guardian Signature:** \_\_\_\_\_

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

*New City Kids is a private non-profit organization which is supported by the generous donations of individual donors and foundations. New City Kids is required to provide the following information in order to satisfy our funding requirements. Thank you for your assistance!*

**Please circle the answer that best represents your family structure:**

- Is your family's Head of Household?      Male                  Female
- Is your family's Head of Household handicapped?      Yes                  No
- Is your family's Head of Household a Veteran?      Yes                  No
- Are you married?                  Yes                  No
- Are you eligible for the free lunch program?                  Yes                  No
- Is this the first time your child has participated in Summer Camp?      Yes      No

**Income Breakdown**

Number of Household Members (Include yourself): \_\_\_\_\_

What is your annual household income (Include yourself): \_\_\_\_\_

\*If you are paid hourly, please fill out below:

\$ \_\_\_\_\_/Hour      Estimated number of hours per week: \_\_\_\_\_

**Please check all that apply:**

Child's Race		
	Hispanic/Latino	Non Hispanic/Latino
White		
Asian/Pacific Islander		
Black/African American		
Native Hawaiian/Other Pacific Islander		
Asian & White		
Am. Indian/Alaskan Native & White		
Am Indian/Alaskan Native & Black/African American		
Other Multi-Racial		