

# Kids' Place Grades K-6

## Summer 2011 Registration and Payment Agreement

For Office Use Only

Date Received \_\_\_\_\_

Received by \_\_\_\_\_

### Student Information

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade in 2010-11 \_\_\_\_\_

Shirt Size: Youth S  M  L  Adult S  M  L  XL  School Name in 2010-11 \_\_\_\_\_

Please try to place my child with the following children: \_\_\_\_\_

Will your child attend academic summer school? Yes  No  Date of last DPT (Tetanus shot) \_\_\_\_\_

Physician/Clinic Name and Phone Number \_\_\_\_\_

Dentist/Clinic Name and Phone Number \_\_\_\_\_

Important health information or Medical Alerts  None \_\_\_\_\_

Allergies  None \_\_\_\_\_

Medications  None \_\_\_\_\_

Does your child have any physical or mental impairments which would affect his/her participation in child care setting? If yes, please describe.

None \_\_\_\_\_

### Parent Information

#### Parent 1/Financial Sponsor:

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Phone numbers: Call first \_\_\_\_\_ Alternate number \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

#### Parent 2:

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Phone numbers: Call first \_\_\_\_\_ Alternate number \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

## Emergency Contacts – Must list 2

These people are also authorized to pick my child up.

Contact 1 Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Contact 2 Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Contact 3 Name \_\_\_\_\_ Phone Number \_\_\_\_\_

## Summer Schedule

Please indicate the days your child will attend Kids' Place this summer.  
Your child must be enrolled for at least **10 days**.

Typical drop-off time: \_\_\_\_\_

Typical pick-up time: \_\_\_\_\_

JUNE				
MON	TUE	WED	THU	FRI
13	14	15	16	17
20	21	22	23	24
27	28	29	30	

JULY				
MON	TUE	WED	THU	FRI
				1
closed	5	6	7	8
11	12	13	14	15
18	19	20	21	22
25	26	27	28	29

AUGUST				
MON	TUE	WED	THU	FRI
1	2	3	4	5
8	9	10	11	12
15	16	17	18	19
22	23	24	25	26

Kids' Place reopens for the 2011-2012 school year on Tuesday, September 6.

## Lunch Option

- Yes!** Please add the lunch program to my child's registration at a cost of \$4.25 for each day my child is enrolled. My child will receive a bag lunch each day including sandwich/wrap, fruit/veggies, milk/drink, and a small treat.

## Red Cross Swim School

Summer swim lessons will be offered by the Community Education Aquatics Department staff to children in grades K-6 participating in the Kids' Place program for an additional cost. Classes will be held in the Central pool. Kids' Place staff will walk swimmers to and from class each day.

### Swim School Levels 1-5

Red Cross classes work on skills pertaining to your child's individual level. If you are not sure which level your child is in, s/he will be tested on the first day of class. To register, mark the session/s your child will attend below.

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Red Cross swim level or summary of swimming experience: L1  L2  L3  L4  L5  Not Sure

Other experience/previous classes: \_\_\_\_\_

June 20-June 30, 8 Lessons, M-Th

- |  |           |            |             |                     |
|--|-----------|------------|-------------|---------------------|
| <input type="radio"/> Shorty Beginners/Beginners | Ages 5-8  | Levels 1-2 | 10:00-10:30 | Cost: \$52.00/child |
| <input type="radio"/> Swim School Levels III-V   | Ages 6-12 | Levels 3-5 | 10:30-11:15 | Cost: \$56.00/child |

July 11-21, 8 Lessons, M-Th

- |  |           |            |             |                     |
|--|-----------|------------|-------------|---------------------|
| <input type="radio"/> Shorty Beginners/Beginners | Ages 5-8  | Levels 1-2 | 10:00-10:30 | Cost: \$52.00/child |
| <input type="radio"/> Swim School Levels III-V   | Ages 6-12 | Levels 3-5 | 10:30-11:15 | Cost: \$56.00/child |

Please read and initial in each box.

	<p><b>Medical/Emergency Procedures</b>                  I give my permission to Kids' Place to make whatever emergency measures are judged necessary for the care and protection of my child while under the supervision of the Kids' Place staff. In case of a medical emergency, I understand that my child will be transported to the nearest hospital by ambulance if the local resource (police/rescue squad) deems it necessary. I will be responsible for the cost of the transportation and any and all medical charges. It is understood that in some medical situations, the staff will need to contact the local emergency resources before the parent and/or another adult acting on the parent's behalf. Medical insurance coverage for children is the responsibility of the child's family or guardian.</p>
	<p><b>Data Practice Procedures and Exchange of Information</b>                  Kids' Place complies with State and Federal data laws. Information gathered from registration and medical forms is shared with the teachers in the program to best serve your child's needs. I give my consent to an exchange of information between my Kids' Place site staff and other St. Louis Park Schools professional staff whenever it would be beneficial to my child.</p>
	<p><b>Meals and Snacks</b>                  I understand that my child needs to bring a lunch from home each day unless I have enrolled in the lunch program at an additional cost of \$4.25 per day. An afternoon snack will be provided by Kids' Place and is included in the daily fee.</p>
	<p><b>Publicity</b>                  I give permission for Kids' Place to use video taping, tape recording, photography or any other media to record events for educational or publicity purposes.</p>
	<p><b>Excursions</b>                  I give permission for my child to participate in any field excursion planned and supervised by the staff of Kids' Place. I understand these trips may include various modes of transportation, i.e. walking, biking, school bus, etc.</p>
	<p><b>Sunscreen</b>                  I understand that my child should arrive at Kids' Place with sunscreen already applied in the morning.</p> <p> <input type="radio"/> I give permission for Kids' Place staff to apply any brand of sunscreen on my (our) child as needed throughout the day.  <input type="radio"/> I have provided sunscreen for my child. Only apply the sunscreen I have provided.  <input type="radio"/> DO NOT apply any sunscreen on my child.  <input type="radio"/> Other: _____             </p>
	<p><b>Insect Repellent</b></p> <p> <input type="radio"/> I give permission for Kids' Place staff to apply insect repellent on my child as needed.  <input type="radio"/> I have provided insect repellent for my child. Only apply the repellent I have provided.  <input type="radio"/> DO NOT apply any insect repellent on my child.             </p>
	<p><b>Antibacterial Hand Soap/Lotion</b></p> <p> <input type="radio"/> I give permission for Kids' Place staff to apply antibacterial soap/lotion on my child as needed.  <input type="radio"/> DO NOT apply antibacterial soap/lotion on my child.             </p>
	<p><b>Media</b></p> <p> <input type="radio"/> I will allow my child to access the internet under the supervision of a Kids' Place staff.  <input type="radio"/> I will allow my child to watch a G-rated movie while in Kindergarten, or PG-rated movies in grades 1-6. DVD movies may be an option one time per month.  <input type="radio"/> I will allow my child to play E-rated video games.  <input type="radio"/> I will allow my child to play E-10 rated video games.             </p> <p>No handheld video games, cell phones, MP3 players or personal media devices should come to school with your child during Kids' Place time.</p>
	<p><b>Swimming</b></p> <p> <input type="radio"/> I will allow my child to participate in all swimming excursions.                 <ul style="list-style-type: none"> <li><input type="radio"/> My child is an excellent swimmer and can go in the deep end and use all water slides.</li> <li><input type="radio"/> My child is a moderate swimmer and can go on waterslides, but cannot swim in the deep end of a pool.</li> <li><input type="radio"/> My child is just beginning to swim and should not use water slides, or go in the deep end of the pool.</li> </ul> </p>

Parent Signature: \_\_\_\_\_

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

## Payment Information

Read and sign below to complete the registration.

I am currently receiving child care assistance.  Yes  No

Case worker name: \_\_\_\_\_ Phone: \_\_\_\_\_

Special instructions to consider when creating our family's billing account:

None \_\_\_\_\_

Please send me an Annual Credit Card Authorization form.

This form must be signed and on file in our office in order to initiate automatic credit card payments.  
Visa and Mastercard accepted.

## Summer 2011 Contract Terms

*In signing this contract for services, I agree to the following:*

I understand that my child can not begin at Kids' Place until I receive a written or oral confirmation from the Kids' Place main office. In order to properly prepare for student/staff ratios, Kids' Place reserves the right to not accept or process any registration for up to 5 business days prior to and after the start of any session. All Community Education accounts, including Kindergarten Plus and Kids' Place, must be paid in full in order to register for the summer session.

### Billing and Fees:

1. A non-refundable registration and materials fee of \$30.00 per child (if registered by April 15) or \$60.00 (if registered after April 15) is added to your first invoice of summer. As part of this fee, each child will receive a field trip tee shirt, water bottle, grade level workbook, sand/water-proof money holder, and use of a swim shirt. These items must remain at school until the end of the summer session.
2. You will be billed for the days you've marked on the summer calendar. In order to maintain service, you must pay your bill by the statement due dates on 7/15 and 8/12. Invoices will be placed in your child's parent folder in the classroom. **The full balance for your summer account must be paid by August 12** to avoid suspension of service and holds on future registration in Kids' Place and other Community Education programs and classes.
3. You may not remove days from your child's summer schedule after June 1. Additional days can be added, with teacher approval, at any time, on a space-available basis.
4. There will be no refunds for absence due to illness, vacation or school closing due to inclement weather.
5. A late fee of \$1.00 per minute will be assessed for picking up a child after 6 pm. After the third incident, services may be terminated.
6. You will not be billed for July 4, when Kids' Place and SLP Schools is closed.
7. Kids' Place sites or classrooms may be closed or moved due to enrollment/staffing needs. In this event, you will be given at least two week's notice.
8. The Dept. of Community Education reserves the right to cancel this letter of agreement at any time. In this event, you will be given two week's notice.
9. I understand my child's enrollment will be terminated and my account will be turned over for collection if it is in default. I will be held responsible for all costs related to collections, including legal fees.
10. Each child must be enrolled in the summer program for a minimum of 10 days.

### Please review the Summer Contract Terms above before signing.

By signing, I confirm that I have read, understand and agree to the Kids' Place 2011 Contract Terms as stated on this form.

Parent 1 Signature \_\_\_\_\_

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

Parent 2 Signature \_\_\_\_\_

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

## Return this Form

### Mail

Kids' Place Main Office  
Central Community Center  
6300 Walker Street  
St. Louis Park, MN 55416

### Email

[johnson.terri@slpschools.org](mailto:johnson.terri@slpschools.org)

*You will receive an email confirmation of your family's registration when it is received in our office.*

### Questions

(952) 928-6764

FAX (952) 928-6728

Thank you.