

## SUMMER 2017 REGISTRATION FORM

### Child Information

First Middle Last Date of Birth

Street Address City State Zip

### Weeks Attending (Please check all that apply)

<input type="checkbox"/> <b>Session 1</b> July 3 <sup>rd</sup> - 7 <sup>th</sup>	Cooking Around the World with Sharon N'Diaye and S.T.E.A.M with Johanna Reinhardt
<input type="checkbox"/> <b>Session 2</b> July 10 <sup>th</sup> - 14 <sup>th</sup>	Robotics with Computer Adventures
<input type="checkbox"/> <b>Session 3</b> July 17 <sup>th</sup> - 21 <sup>st</sup>	Summer Fun with Andrea Latvis and Jackie Wlodarczak
<input type="checkbox"/> <b>Session 4</b> July 24 <sup>th</sup> - 28 <sup>th</sup>	Cooking Around the World with Sharon N'Diaye and Art + Discovery with Adam Osterfeld
<input type="checkbox"/> <b>Session 5</b> July 31 <sup>st</sup> - Aug 4 <sup>th</sup>	Robotics with Computer Adventures and Ancient Mythology with Sakura Ozaki



## SUMMER CAMP 2017

The Manitou School, 1656 Route 9D Cold Spring, NY 10516  
p 845.809.5695 f 845.205.9122 [www.manitouschool.org](http://www.manitouschool.org)

### ***Applicant's Parent/ Guardian Information***

\_\_\_\_\_  
First Name Last Name E-Mail

\_\_\_\_\_  
Street Address City State Zip Code

### ***About Your Child***

Describe your child in three to five words: \_\_\_\_\_

How does your child learn best?

\_\_\_\_\_  
What are your child's special talents, interests, and abilities?

\_\_\_\_\_  
My child is allergic to: \_\_\_\_\_

**General Release:** I hereby release The Manitou School, LLC ("Manitou") its employees, staff and volunteers from any and all liability or claims for damages arising from my child's attendance to Summer Programs at Manitou

**Photo Release:** By signing this form, I give permission for my child's photographs and/or artwork to be used by Manitou

**Security Deposit and Payment:** A non-refundable deposit of \$100 is due upon registration in order to secure your child's spot. Full payment is due by **April 17<sup>th</sup>, 2017** or your spot will be forfeited. Refunds before June 1<sup>st</sup> are subject to a \$100 cancellation and processing fee.

**Pick-Up Authorization:** The people designated on the list below are authorize to pick-up my child at the end of the day or due in case of emergency

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

***By signing this form I acknowledge that I have read and understood the policies in this and all documents related to the Summer Programs at Manitou***

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