## Ocean State Kidz Club- Registration Form 2024-2025

Child's Name:					
Parent's/ Guardian's Name:					
Phone: Cell #1:	Cell #2:				
Address:	City, State, Zip:				
E-mail:		<u>—</u>			
Child's D.O.B: Age: _	Current Grade: Female/Male				
Referred By:					
Please check the days of the week t	hat your child will be attending our program.				
Mon Tue Wed	Thur Fri				
Start Date://	School Name:				
Program options:	). (\$1.40 manus als)				
After-school full time (4-5 days): After-school part time (3 days):	): (\$140 per week)				
After-school part time (3 days): After-school part time (2 days):					
After-school part time (2 day):					
Summer Camp FULL TIME:					
	pril): (\$280 per week or Part Tim	ie; \$80 per day)			
<b>DHS/ CCAP:</b> Complete this section active certificate number. Certificate	on below if <b>DHS</b> childcare assistance applies: No ch te #:	ild can start without a valid			
submitted by their start date.  ***** I understand that my securit	information packet and handbook filled out and all y deposit will be used for my last week of childcare r to the week your child is attending.				

Parent's Signature: \_\_\_\_\_\_Date: \_\_\_\_\_

## **Ocean State Kidz Club - Program Policies** Initial: **Tuition:** Tuition payments must be made by the Friday prior to the week your child is attending. You are responsible to pay weekly tuition whether your child is absent, out sick, dismissed early, late arrival, the facility is closed due to a legal holiday, inclement weather (power outage) or snow days. I understand that my security deposit will be used for my last week of childcare, otherwise non-refundable. If a payment is not made, a \$10 late fee will be imposed each day the payment is late. I UNDERSTAND MY WEEKLY TUITION FEE AND AGREE TO PAY THIS AMOUNT BY THE DATE IT IS DUE. Please indicate how you will be making your payments: \_\_\_\_\_ Meekly payments \_\_\_\_\_ Bi-monthly payments \_\_\_\_\_ Monthly payments Payments must be made on the first Friday of each week/month **Hours of Operation:** After-school: Monday- Friday 2:00 PM to 5:30 PM Vacation week: Monday- Friday 7:45 AM to 5:00 PM Monday- Friday 7:45 AM to 4:45 PM Summer camp: Please respect our hours of operation. Picking up your child late will result in a late fee of \$10.00 for the first 15 minutes and a \$1.00 per minute thereafter. **Absences:** Parents must notify the center when their child will not be attending Ocean State Kidz Club. Medical Records: Ocean State Kidz Club will need an updated copy of your child's most recent physical/medical records. Parent Signature: Date **Registration Requirements:** \_ \$40.00 Non-Refundable Registration Fee (per child, per program)

\$100 Per Child Security Deposit Required- (Held against last week of care, otherwise non-refundable)

Medical Records/Physical Form

Media Agreement & Code of Conduct

**General Information Packet** 

<b>Childs</b>	Name:			

## **Summer Camp 2024 Prices:**

Tuition: \$280 per week

## \*\*Minimum of 3 weeks per camper

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_	Week 1: June 17 <sup>th</sup> to June 21 <sup>st</sup> (CLOSED on Wednesday, June 19 <sup>th</sup> )
	Week 2: June 24 <sup>th</sup> to June 28 <sup>th</sup>
	Week 3: July 8 <sup>th</sup> to July 12 <sup>th</sup>
	Week 4: July 15 <sup>th</sup> to July 19 <sup>th</sup>
	Week 5: July 22 <sup>nd</sup> to July 26 <sup>th</sup>
	Week 6: July 29 <sup>th</sup> to August 2 <sup>nd</sup>
	Week 7: August 5 <sup>th</sup> to August 9 <sup>th</sup>
	Week 8: August 12 <sup>th</sup> to August 16 <sup>th</sup> (CLOSED on Monday, August 12 <sup>th</sup> -VJ DAY)
	Week 9: August 19 <sup>th</sup> to August 23 <sup>rd</sup>
OSK will	be closed on:
Wednes	day, June 19 <sup>th</sup> , 2024 – Juneteenth Day
Monday	, July 1 <sup>st</sup> – Friday July 5 <sup>th</sup> , 2024 4 <sup>th</sup> of July Recess
Monday	, August 12 <sup>th</sup> , 2024 VJ DAY

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