

Summer Program Application

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			For Camp Use Only:
			Date Application Received:
Lincoln Campus 🗌	Newton Campus		Age at Admission: Date of Admission:
Date	-		
Child Information			
	Child	's Last Name:	
			Zip:
Home Phone:	Primary	/Language:	
		Gender:	
Height:	Weight:	Race:	
Identifying Marks:	Allergi	es:	
Parents Information			
Parent's Name:		Parent's Nam	e:
Iome Address:		Home Address:	
if diffe	rent from above		if different from above
City: Home Phone:			Zip:
Cell Phone: Occupation & Title:		Occupation & Title:	
Employer's Name:		Employer's Name:	
Business Address:		Business Address:	
City:			Zip:
Business Phone:			ne:
Pager:			
Email:			
Other:	print		please print
Parents: Married	Separated		DeceasedOther
If remarried, stepparents' no	ames.		

Program Enrollment

Please place a \checkmark in the boxes below to indicate the session(s) for which you wish to enroll your child.

	Session 1	Session 2	Session 3
Morning Session			
Afternoon Session			
Full Day Session*			

- *Please note that our full-day session is only available to children ages three and up
- Please check this box if you wish to sign up for Early Drop-off

Once your choice has been made, please remember to write your choice of sessions on your calendar.

Enrollment Agreement

Must be signed by parent or guardian

- The required deposit of \$400 is enclosed and I agree to pay the balance of the summer program tuition on or before April 15.
- I understand that my child may not attend unless the Teddy Bear Club receives a completed Health Form by June 1.
- I understand and accept the Teddy Bear Club policies concerning non-refundable deposits and non-refundable tuition as well as terms of enrollment described in the Teddy Bear Club Summer Program brochure.
- I understand that once an application is accepted by the Teddy Bear Club, no funds or transfer of funds will be made for withdrawal, dismissal, failure to attend or incomplete attendance.
- I understand that the Teddy Bear Club may cancel my child's reservation if the full balance of the tuition has not been received by April 15.

Name of Parent or Guardian:

Signature: _____

Date:_____

Teddy Bear Club Summer Program 1466 Commonwealth Avenue West Newton, MA 02465

Please contact us with any questions at:

Newton: 617-332-1611 Lincoln: 781-259-0009

Fax: 617-332-1661

Email: <u>tbc@teddybearclub.org</u>

The Teddy Bear Club does not discriminate on the basis of race, gender, religion, cultural heritage, political beliefs, marital status, sexual preference, disability or national origin.