

Embracing Equality and Diversity ild Development Center, LLC Summer Camp Registration Form 2023

Child's name:	DOB:	Age:
Parent/Legal guardian Name:		
The parent/ legal guardian listed here will be the pe the main contact in case of emergency.	rson responsible for payment itial	s and will be
Address:		
Parent/Legal guardian Cell phone #:	Parent/Legal guardian Emai	l:
Parent/Legal guardian Work phone #:		
Non- Refundable Field Trip Registration fee: \$450.00 Tuition includes daily breakfast, lunch, and pm snac accounts on HiMama every Wednesday before the dand must be paid on time to continue participation I understand that on fieldtrip days my son/dathan 8:00AM. *Please note that some fieldtrip	ck. *Weekly invoices will posture date. Weekly Tuition is dure in the summer program. aughter should arrive at the	t to family ie every Monday center no later
 I understand that the Hope Grows van will le 8:00 AM and there will be no refunds for mis. I understand that I must sign my child in da I authorize Hope Grows Child Development Coenter's van, to and from the center. I understand that my child must be dressed are planned for each week. I understand that I must provide medication for my child if my child has a medical condition. 	sed field trips. ily through the HiMama applenter, LLC to transport my cappropriately for the differer and appropriate Office of Ch	lication. hild in the nt activities that
I give my consent to Hope Grows Child Development on all fieldtrips, all (Child's name)		
 Family Expectations: All children have the responsibility to treat of respect. All parents and children have the responsibility not endanger, intimidate, or interfere with the children have the responsibility to follow insomore the properties of the properties of the content of the conte	ity to act and behave in a we the participation of others. structions given by teachers. will not tolerate the use of of or any other form of aggress gram will be scheduled accor nent Center, LLC, is not respo	ay which does fensive iive behavior. ding to the
By signing below, I agree to all rules and regulations	s stated hereby:	
Parent/ Legal Guardian Name:		
Signature:	Date:	



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Hope Grows Child Development Center, LLC Summer Camp Student Agreement:

- I will treat all staff, including my teachers, my peers and Hope Grows property with respect.
- I will act and behave in a way which does not endanger, intimidate, or interfere with the participation of myself or others.
- I will follow all directions given by Hope Grows staff who are supervising me in the classroom, on field trips or local parks and at all Hope Grows locations. All staff personnel include all my teachers, any substitute teachers, all teachers at other Hope Grows locations providing direct supervision or all directors of Hope Grows and the Owner, Ms. Salema Horn.
- I will not use offensive language, sexist or racist language during field trips, in my classroom, or at any Hope Grows locations.
- I will use respectful language amongst all peers and Staff.
- I will not fight or physically harm others and I will not verbally or physically bully others or use any aggressive behavior during field trips, in my classroom, or at any Hope Grows locations.
- I understand that electronic devices use is limited during summer camp, and I will follow the schedule for electronic device time.
- I will safely put away my electronic devices when the allotted time has ended.
- I understand that I am responsible for any non-electronic or electronic items brought from home.
- I will respect everyone's personal property by not touching or destroying it.
- I will have fun!

2023 at Hope Grows on	(Date)		
Student Name:			
Student Signature:			
Parent/Legal Guardian Name	::		
Parent/Legal Guardian Signa	ture:		