



Enrollment Form

Child's Name: _____ Date of Birth: _____ Sex: _____
Address: _____ City, State, Zip: _____
With whom does the child reside? _____

Parent/Guardian 1: _____
Relationship to Child: _____
Home Address: _____
City, State, Zip: _____
Home Phone: _____
Cell Phone: _____
Email: _____
Name of Employer: _____
Title/Occupation: _____
Work Telephone: _____

Parent/Guardian 2: _____
Relationship to Child: _____
Home Address: _____
City, State, Zip: _____
Home Phone: _____
Cell Phone: _____
Email: _____
Name of Employer: _____
Title/Occupation: _____
Work Telephone: _____

Child's Physician or Clinic: _____ Phone: _____

Street Address of Clinic: _____ City, State, Zip: _____

Emergency Hospital Preference: _____

Does your child have any known allergies, if yes, what precautions need to be taken? Yes No

What are they? _____

Any special medical condition/special need that HCA needs to be aware of?

I authorize (name of child) _____ to participate in water activities and/or on site extra-curricular activities with the extra-curricular teacher, including, but not limited to music, gymnastics, dance, yoga.

Signature: _____ Date: _____

I acknowledge that Happy Campers uses video to monitor the activities of each room in the facility, and I agree to allow my child(ren) to be included in this process for the purposes of monitoring and safety.

Signature: _____ Date: _____

Child's Name: _____ Date of Birth: _____

Person(s) **authorized** to pick up child:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Person(s) **NOT** authorized to pick up child(court documentation may be required):

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Person(s) to contact in case of **emergency** (If all attempts at contacting parents have failed):

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Choose your Program:

5 days (M-F)

3 Days (MWF)

2 days (Tues & Thurs)

Siblings at Happy Campers Academy _____ Age: _____

_____ Age: _____

_____ Age: _____

Happy Campers Financial Policies

A \$200 non-refundable enrollment fee (\$300 for two or more children), will be due upon enrollment, and annually during re-enrollment in March.

Tuition is payable in advance and is non-refundable. Tuition is due on the first day of every month. A late fee of \$30 will be assessed 5 days after the due date, and there will be a \$30 charge for returned checks and declined credit/debit cards. For those part time children, an added day of care is \$75 per day and is based on availability.

Tuition will be billed and is due each month that your child is enrolled at HCA, including the thirty-day period after which you have given written notice to HCA that you are withdrawing your child. We must receive a 30-day written notice.

When a child's birthday occurs, the new rate will be applied the following month. (The month after the birthday occurs.)

For parents who are late picking up their child, a late fee of \$1.00 per minute will be due at the time of pick up in cash form.

The HCA enrollment form, Emergency card, and current Immunization records must be provided upon the first day of attendance.

By signing below, I confirm that I have read the online parent handbook, and I understand and will abide by the illness policy at Happy Campers.

Parent Signature: _____ Date: _____