

St. Mark's 2019 Summer Day Camp

1 East Haddon Ave. Oaklyn, NJ 08107

Registration Form



St Mark's Summer School accepts all children regardless of race, color, religion, sex or national origin. All information will be kept confidential.

We are non-profit and do everything we can to keep our expenses low, so that your expenses are low. Please print or type the necessary information requested below.

You must submit a Nonrefundable/transferrable registration fee of \$65/1 child, \$95/2 children, \$125/3 children or more. Registration includes 1 t-shirt for trips. Additional t-shirts can be purchased at \$15 each.

Child's Name: _____

DOB: _____ Age: _____ Grade entering in fall: _____ Shirt Size : _____

Home address: _____

Parent 1's name: _____ Cell #: _____

Parent 2's name: _____ Cell #: _____

Parent 1's employer: _____ Employer's #: _____

Parent 2's employer: _____ Employer's #: _____

Parent 1's Email: _____ Parent 2's Email: _____

Primary Email: Parent 1 or Parent

Person to be notified in case of emergency (in the event that the parents cannot be reached (Please add to BrightWheel also).

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Child's physician: _____

Address: _____ Phone #: _____

Hospital preference: _____

Pediatrician (Name & Phone #): _____

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Physical limitations and/or allergies; existing illnesses and/or medication prescribed for continuous use: _____

If your child requires use of an EPI Pen, the parents must supply St. Mark's a pen to retain at the facility.

Please check and sign below:

I authorize my child to be taken by ambulance to the nearest hospital in case of emergency.

I prefer _____ Hospital. _____

Parent's Signature

If you have authorized someone else to pick up your child, please provide their names and phone numbers in our BrightWheel system. Name should match their official ID. Also please add a clear photo of the person so that we can verify with their ID.

I understand and will update BrightWheel with the required information.

_____ Date: _____

Does your child have any allergies? (please provide details and add to BrightWheel profile): _____

Please use this space to provide us with any medical information about your child that you think we should be aware of for the program: _____

Please use this space to provide information in which the Summer Camp Program staff should be aware of for your child's welfare: _____

I would like my child to take part in any planned Christian activities: Yes No

Please note that Vacation Bible School is the week of 7/15 – 7/19. All children attending this week must attend.

I have no objection to the use of photographs of my child for educational and/or promotional purposes.

I object to the use of photographs of my child for educational and/or promotional purposes.

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Please circle the days in which your child will be attending our Summer Camp:

Monday Tuesday Wednesday Thursday Friday

Please circle number of days of the class you are enrolling your child in.

Please email mrrich@stmarksoaklyn.com if you have questions or special request. We will do our best to accommodate.

We understand that things come up and you may need to come on an unscheduled day. We will always do our best to accept that child, however if we are at compacity we will not be able to accept any unscheduled.

Additional days can be added; however children must schedule 2 days in a week to be counted as **scheduled**. Also for a day to be considered **scheduled**, it must be paid the week prior to the schedule day, this is required to make sure we have the appropriate staff for that day.

If you plan to join us different weeks, please note the dates below.

This year Pricing is including trips, pizza, and ice cream day. Additional Donations toward this cost is always welcome.

NOTE: A family extra discount will be available to families with more than 1 child attending a FULL FIVE-DAY WEEK.

Class	Age or Grade your child will be in September	Circle Number of days per week
Bunny Full Day	2 ½ to 4	2 3 4 5
Bunny ½ Day	2 ½ to 4	2 3 4 5
Bear Full Day	4 to entering Kindergarten	2 3 4 5
Bear ½ Day	4 to entering Kindergarten	2 3 4 5
Rocket Kids Junior Full Day	Entering 1 st Grade to 2 nd Grade	2 3 4 5
Rocket Kids Senior Full Day	Entering 3 rd Grade and Up	2 3 4 5
Please Comment if you have different dates or request needed.		

1/2 Day 7:30 AM-1 PM 2 ½ to Starting Kindergarten in September (Bunny & Bears)						
Program Hours	# of Days	Scheduled Day	Unscheduled Drop off	Weekly	Monthly	Full Summer 13 Weeks
7:30-1:00 PM	5			\$ 175.00	\$ 700.00	\$ 2,210.00
7:30-1:00 PM	4			\$ 145.00	\$ 576.00	\$ 1,820.00
7:30-1:00 PM	3			\$ 111.00	\$ 444.00	\$ 1,430.00
7:30-1:00 PM	2			\$ 80.00	\$ 320.00	\$ 1,033.50
7:30-1:00 PM	1	\$ 40.00	\$ 45.00			
Full Day 1st-5th 7:30 AM - 6 PM age 2 ½ to Starting Kindergarten in September. (Bunnies & Bears)						
Program Hours	# of Days	Scheduled Day	Unscheduled Drop off	Weekly	Monthly	Full Summer 13 Weeks
7:30-6:00 PM	5			\$ 220.00	\$ 870.00	\$ 2,762.50
7:30-6:00 PM	4			\$ 176.00	\$ 700.00	\$ 2,262.00
7:30-6:00 PM	3			\$ 135.00	\$ 535.00	\$ 1,725.00
7:30-6:00 PM	2			\$ 90.00	\$ 360.00	\$ 1,160.00
7:30-6:00 PM	1	\$ 45.00	\$ 55.00			
Full Day 1st-5th 7:30 AM - 6 PM 1st - 5 th Grade. 6/20/2019-8/30/2019 (Rocket Kid Jr and Rocket Kid Sr)						
Program Hours	# of Days	Scheduled Day	Unscheduled Drop off	Weekly	Monthly	Full Summer 10 Weeks
7:30-6:00 PM	5			\$ 220.00	\$ 870.00	\$ 2,160.00
7:30-6:00 PM	4			\$ 176.00	\$ 700.00	\$ 1,730.00
7:30-6:00 PM	3			\$ 135.00	\$ 535.00	\$ 1,325.00
7:30-6:00 PM	2			\$ 90.00	\$ 360.00	\$ 885.00
7:30-6:00 PM	1	\$ 45.00	\$ 55.00			

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Anticipated time you will Drop off your child (Must be by 9am on trip days): _____

Anticipated time you will picked up your child: _____

I give permission for my child to walk with St. Mark's to local parks and facilities.
(library, Ice Cream shop, etc.)

Parent's signature

I give permission for my child to participate field trips that the class may take during the summer:

Parent's signature

I would like my child to take part in any planned Christian activities: Yes No

I have no objection to the use of photographs of my child for educational and/or promotional purposes.

I object to the use of photographs of my child for educational and/or promotional purposes.

I understand that it is mandated that I hand in my child's current, Universal Health Record, and any additional documents, by the end of the first week of summer camp. Failure to do so may result in expulsion.

Parent's signature

Spots will be filled on a first come first serve basis provided we receive a fully completed registration form along with the registration payment.

Please retain the following page for your records. It contains important information for your reference regarding our program as well as pricing/policy information.

For office Usage

Date registration was received:

Check # _____

Money order # _____

Paid in BrightWheel _____

Room _____ Days _____

Dates _____

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Please keep the following information for your reference.

- Monthly Payments Must be paid for 1st of each month and considered late by the 15th. Late charges are \$10 per month.
- Weekly Payments are required the week before to be counted as Scheduled.
- Our Summer Camp is open until 6:00 pm. It is IMPERATIVE that your child be picked up by this time due to the fact that this is a shared facility and there may be other functions which will begin after 6:00.
 - If your child is not picked up by 6:00 the following will apply:
 - \$5.00 for the first (5) minutes late.
 - Any time after the first (5) minutes is billed \$1.00 per minute.
- We use a system called [BrightWheel](#), please make sure you sign up for your account once you receive the invite.
- For security reasons only, St. Mark's must have a clear photo of each parent in their BrightWheel Profile. Please also make sure we have a clear photo of your child and any Approved Pick up person in your child's profile. When Approved Pickups happen, we will request an ID check against what we have in BrightWheel.
- **Please make sure your BrightWheel profile is current with contact information. i.e. mobile phone, email address, etc.**
- Please check your child's backpack each school day for updated important information
- Communication is easy with BrightWheel, please feel free to message us any time.
- Our e-mail address is: mychildscareteam@stmarksoaklyn.com
- Our Facebook Group is: [stmarksoaklynschool](#). This page is private and no names are ever associated with any of the children in our program. It is a source of information and reminders. We encourage you to join this page.
- Our Facebook Page is www.facebook.com/stmarksokalynschool this will also take you to our group so you can join.
- Help us keep our expenses low, check out our amazon wish list. <https://goo.gl/rF7yJQ>
- Main office #: 856-854-0806
- Rich Dornisch is our Program Director. mrrich@stmarksoaklyn.com
- Financial Secretary's #: 856-854-5910 to reach. Christina Soltys financial@stmarksoaklyn.com
- Any changes in phone numbers, addresses or medical information must be reported ASAP and updated in BrightWheel.
- Any changes to the people permitted to pick up your child must be reported ASAP to your child's teacher and school director as well as updated in BrightWheel.

