



HOME SCHOOL _____

T-SHIRT SIZE _____

A - Child Information:

Student First Name: _____ Last Name: _____

Home Address: _____ City: _____ Zip Code: _____

Grade (Fall 26): _____ Race / Ethnicity: _____ Male: _____ Female: _____

B - Parent / Guardian Information

First Name: _____ Last Name: _____

Home Address: _____ City: _____ State _____ Zip Code: _____

Employer: _____ Address: _____

Cell Number: _____ Work Number: _____

First Name: _____ Last Name: _____

Home Address: _____ City: _____ State _____ Zip Code: _____

Employer: _____ Address: _____

Cell Number: _____ Work Number: _____

CHILD LIVES WITH: Mom and Dad; _____ Mom only; _____ Dad only; _____ Other _____

People have custody of child/children _____ Custody Restraints? Yes, _____ No _____

Paperwork Given? Yes, _____ No _____

C - Family Emergency Contacts (2)

Contact 1 - First Name: _____ Last Name: _____

Contact 1 - Relationship: _____ Phone #: _____

Contact 2 - First Name: _____ Last Name: _____

Contact 2 - Relationship: _____ Phone #: _____

D -Medical Information

Health History – Please describe all health issues. Indicate whether your child takes any daily medications. Does your child have any special learning needs? A copy of current Student Physical is required

_____ Parents Initials: _____

Does your child take medication for the above? Yes _____ No _____

CHILD / CHILDREN WILL ONLY BE ALLOWED TO START SUNSATONAL SUMMER WHEN MEDICAL FORMS, CARE PLAN FORM, MEDICATIONS AND A COPY OF STUDENT PHYSICAL ARE RECEIVED BY THE EXTENDED LEARNING/SUNSATONAL SUMMER PROGRAM OFFICE

I hereby give permission for my child to be rendered first aid by the Nurse / SunSational Staff and to be transported by ambulance to Danbury Hospital (or the nearest hospital/field trip) and treated in case of an emergency. I will incur all costs of treatment and transportation.

Parent Print Name

Parent Signature

Date

SUNSATIONAL COSTS / REGISTER FOR WEEK / WEEKS

\$25.00 Registration Fee (Non-Refundable) & \$175.00 / Per Week (Week 2 - \$140.00)

Week 1: June 22 – June 26 _____

Week 4: July 13 - July 17 _____

Week 2: June 26 - July 03 _____ (Closed - 07/03)

Week 5: July 20 – July 24 _____

Week 3: July 06- July 10 _____

Week 6: July 27 – July 31 _____

Total Weeks: _____ \$175.00 / Per Week

Total Cost: _____

SUNSATIONAL SUMMER PROGRAM PARENT / GUARDIANS CONTRACT

1. Full weekly tuition is due at the end of the first week in June, prior to the start of SunSational Summer Program. SunSational Summer will last for six (6) weeks. A \$25.00 Non-Refundable Registration Fee, along with the 1-week tuition (\$175.00), is due at the time of registration. The total amount due at registration is \$200.00. Payments are accepted in the form of cash, check, credit/debit card, or money order. I understand that if payment is not made in full before the start of SunSational Summer Program, my child(ren) will not be permitted to attend. I understand that all past due balances must be paid in full prior to registering for the Summer Program.
2. I understand that anyone picking up my child must be at least 18 years of age and must present an original photo identification (i.e. driver's license, passport, state ID) to the staff and must be on the emergency contact list.
3. I understand that SunSational Summer Program hours of operation are 7:30 a.m. – 5:30 p.m. Due to unforeseen circumstances or excessive heat, the program may close for the day or close early. If closing early; In such cases, a designated person must be available to pick up my child.
4. I understand and agree with the SunSational Summer Program Late Pick Up Policy:
Late Pick-Up: For every minute late, I will be charged \$3.00, which will be included in the following week's tuition. If I am more than 30 minutes late (past 5:30 p.m.), the Danbury Police Department will be called, and my child will be turned over to them. Chronically late pick-ups will result in termination from the program.
5. I understand and agree with the SunSational Summer Program Photo/Video and Social Media Policy:
SunSational Summer Program may take pictures, video, or audio of my child to promote the program. These may be shown on public access channels. No names will be used along with the image of any children. To opt out of photo/video, notification in writing must be received by the SunSational Summer Program within one week of enrollment. SunSational Summer follows the Social Media Policy of the Danbury Public Schools.
6. I acknowledge the possibility that my child may be injured because of his/her participation in program activities. I will not hold SunSational Summer Program, its instructors, administrators, personnel, the Danbury Public Schools, or their subcontractors responsible for any injury. I hereby waive all claims against them.
7. I give permission to SunSational Summer Program to ask my child to complete surveys evaluating various aspects of the program and to record my child's height and weight. I understand that all data collected regarding my child will be kept confidential and will be used for group reporting only.
8. I agree to keep the following information current- home address, email, phone number, and emergency contacts. I will immediately advise the Program Manager / Site Facilitator about any changes to my contact information.
9. I have indicated on the SunSational Summer Program Registration Form if my child has any medical or special needs. **I understand that my child / children cannot attend SunSational Summer Program if completed medical forms and medication is not supplied prior to their start date.** If there are medical changes during his/her enrollment I will notify the program in writing immediately. I understand that failure to disclose any medical or special needs at the time of enrollment or at any time during my child's enrollment, is grounds for termination from the program.
10. If my child becomes ill, I agree that I, or an authorized person, will pick up the child within 30 minutes of notification.
11. I understand and agree with SunSational Summer Program Expectations: SunSational Summer Program follows the discipline Code of the Danbury Public Schools. Children who exhibit behavior negative to the program may require a parent meeting and the development of a Behavior Plan. Any persistent or severe behavior problems by my child may result in suspension or termination from the program. In good faith, SunSational Summer Program makes every effort to the continued enrollment of all children. The SunSational Summer Program Parent Guide is accessible at; <https://www.danbury.k12.ct.us/extended-learning-program/>. SunSational Summer follows all the Danbury Public Schools Board of Education policies. Parents and Guardians are expected to always show respectful behavior while in SunSational Summer or at special events. Any disrespectful behavior including foul language, yelling, intimidation of children or staff, or other threatening behavior may result in termination of my family from the program.
12. I understand that the programs that my child(ren) are enrolled in may require my child's scores on tests administered by the district and will be used in aggregated (in groups) form with no identifying characteristics to my child(ren) or family.
13. I understand and agree with the SunSational Summer Program contact policy:
Should I have any questions or concerns regarding my child or the SunSational Summer Program, I will contact the Site Facilitator, Program Manager, or the Administrator of the Program. I understand and agree with the SunSational Summer Program Cancellation and Refund policy: Cancellations must be made prior to SunSational Summer starting. **No refunds** will be given after the end of June. In the case of family emergencies, credits will be given for future programs.

Parent Name

Parent Signature

Date