

Bethany Lutheran Child Development Center

Registration Form - Kids Kamp 2022



10101 Walnut Hill Lane * Dallas, Texas 75238
214-348-9691 * cdc@bethany.net

Child's Name		Date of Birth	Telephone Number
Child's Address, City, Zip		E-mail Address	
Please select the program <i>Age as of June 1, 2022</i> <input type="checkbox"/> 18-24 months <input type="checkbox"/> 2-2.5 years old <input type="checkbox"/> 2.5 to not yet 3 <input type="checkbox"/> 3 years old <input type="checkbox"/> 4 years old <input type="checkbox"/> 5-6 years old	Summer Program 2022 Mon/Tue/Wed 9:30-2:30 <input type="checkbox"/> Session 1, June 6-22 <input type="checkbox"/> Session 2, July 11-27	With whom does the child reside: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other <i>If applicable, please attach a copy of court documentation of child's permanent residence and custodial rights.</i>	
		Mother's Name _____ DL# _____ Father's Name _____ DL# _____ Legal Guardian _____ DL# _____	
Please list telephone numbers where parents or/guardian may be contacted:			
Mother's Telephone #s		Father's Telephone #s	
Cell:		Cell:	
Work:		Work:	
Occupation:		Occupation:	
<i>I authorize the Center to allow my child to leave the Center ONLY with the following persons (besides parents). In an emergency, if a parent cannot be reached, the Center will contact the following in the order in which they are listed:</i>			
Name:		Phone #:	Driver's License #
LUNCH POLICY:	I understand that the Center does NOT provide lunch and that I am responsible for the nutritional value as described in Minimum Standards and for meeting my child's daily food needs.		
WATER ACTIVITIES			
I hereby <input type="checkbox"/> give <input type="checkbox"/> do not give consent for my child to participate in water activities: <input type="checkbox"/> sprinkler play <input type="checkbox"/> water table play			
PHOTO AND VIDEO RELEASE			
Bethany Lutheran Church Child Development Center has my permission to photograph/videotape my child's image for uses checked below:			
<input type="checkbox"/> ALL	<input type="checkbox"/> scrapbooks	<input type="checkbox"/> newspaper articles	<input type="checkbox"/> pamphlets
<input type="checkbox"/> nametags	<input type="checkbox"/> classroom projects	<input type="checkbox"/> gifts to be sent home	<input type="checkbox"/> videotapes
			<input type="checkbox"/> CDC website
			<input type="checkbox"/> Bethany CDC Facebook

- ⊕ I understand that it is my responsibility to promptly update any information included on any Center forms.
- ⊕ This registration form, along with payment for the summer session fees, will ensure a place for your child in the program. Program fees are due before each summer session begins and are non-refundable.

Tuition for one session is \$340. Tuition for both sessions is \$620.

Parent/Guardian Signature

_____ Date _____

For Center Use Only:	
Date of Admission	_____
Check #	_____
Amount	_____
Date Paid	_____
Date of Withdrawal	_____