



East End Kids Academy
177 Weeks Ave, Manorville, NY 11949
Telephone # 631-924-2100 / Fax # 631-924-5627

AGREEMENT CONTRACT

Jr. Kid / Big Kid / Sr. Kid / SUPER Sr. Kid Summer Camp 2023

I _____, have read and fully agree to all terms and conditions mentioned below.

*** Registration Fee**

- Non-refundable and/or Non-transferable
- Due at the time of registering

*** Payment Schedule**

-All camp tuitions are **DUE IN FULL** by **Monday, June 5th, 2023**

(Parent's Initials)

-All Camp tuitions that are submitted **on or after Monday, June 5th**, are to be **PAID IN FULL** at the time of registration.

(Parent's Initials)

-Additional weeks and/or days can be added **only if available**.

-Additional weeks and/or days must be **PAID** for in **FULL** at the time of requesting.

-A \$20.00 fee will be applied for all returned checks.

-All Credit/Debit card payments will be charged a 3% processing fee

*** Sick, Inclement Weather, Holidays and/or Vacation Days**

-Parents/Guardians are obligated to pay for the weeks and days they choose at the time of registration. This includes paying for sick days and/or any day(s) of absence.

There will be no make-up days, refunds and/or credits.

There will be no switching of days after Monday, May 15, 2023

(Parent's Initials)

- A phone call is appreciated if your child will not be attending on their scheduled days.

*** Late Pick - Ups**

-Late fees will automatically be applied when picking up a child past the contracted time.

-\$1.00 per every minute after 6:00 pm is payable upon pick up

(Parent's Initials)

I, the parent of _____, agrees to pay \$ _____, for the days and hours selected on the reverse side of this agreement.

Parent's Signature: _____ Date: _____

East End Kids Academy Signature: _____ Date: _____

Sr.Kid / SUPER Sr.Kid Summer Camp 2023 Schedule

Camper's Name: _____

Grade Entering in Sept. 2023: _____

Week #	Dates	Days (Minimum 2 days a week)	Before Care (7:00 am)	Camp Hours	After Care (6:00 pm)	Office Use Only	
						Camp	B/A Care
1	June 26-June 30	M T W TH F		9:00am-4:00pm			
2	July 3 - July 7	M W TH F		9:00am-4:00pm			
3	July 10-July 14	M T W TH F		9:00am-4:00pm			
4	July 17-July 21	M T W TH F		9:00am-4:00pm			
5	July 24-July 28	M T W TH F		9:00am-4:00pm			
6	July 31-Aug. 4	M T W TH F		9:00am-4:00pm			
7	Aug. 7-Aug. 11	M T W TH F		9:00am-4:00pm			
8	Aug. 14-Aug. 18	M T W TH F		9:00am-4:00pm			
9	Aug. 21-Aug. 25	M T W 		9:00am-4:00pm			
Camp Rates 9:00am-4:00pm						Camp Total	
2 Days - \$204.00/week						B/A Care Total	
3 Days - \$285.00/week						Registration Fee	
4 Days - \$347.00/week						+	\$ 100.00
5 Days - \$378.00/week						Total Due	

ALL CAMP PAYMENTS ARE TO BE PAID IN FULL BY MONDAY, JUNE 5, 2023 **

**ON or AFTER June 5, 2023, All Camp totals are to be PAID IN FULL at the time of Registering.

No switching, changing, and/or deleting of days after Monday, May 15, 2023

Parents Initial/Date _____

EEKA Initials /Date _____



East End Kids Academy
 177 Weeks Avenue, Manorville, New York 11949
 Phone # (631) 924-2100/Fax # (631) 924-5627
 E-Mail: cwillets@eastendkidsacademy.com

Camp Attending
 Pre School Camp
 Jr Kid Camp (K/1st)
 Big Kid Camp (2nd/3rd)
 Sr Kid Camp (4th/5th)
 SUPER Sr. Kid (6th/7th)

Camp 2023 Application

<u>Child's Name</u>	<u>Grade Attending Sept. 2023</u>
<u>Date Of Birth:</u> / /	
<u>Child's Age:</u>	<u>School District</u>
<u>Gender:</u> Male Female	
<u>Parents:</u> Single Divorced	
Married Separated Other _____	

<u>Guardian #1</u>	** OFFICE USE ** PIN #	<u>Guardian #2</u>	** OFFICE USE ** PIN #
Name		Name	
Relationship		Relationship	
Address		Address	
City		City	
State/Zip		State/Zip	
Cell Phone #		Cell Phone #	
Work Phone #		Work Phone #	
Home Phone #		Home Phone #	

****Primary E-Mail :**

**** (Please PRINT) ****

Updating all information is the sole responsibility of the parent/guardian.

Please understand the importance of updating your contact numbers in the case of an emergency.

** OFFICE USE **	** OFFICE USE **	** OFFICE USE **	** OFFICE USE **
PAYMENT RECEIVED:	Registration Date:		



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CAMP 2023 Authorization Form

June 26, 2023 thru August 23, 2023

I, _____, the parent and/or guardian of:

Child (a)

Child (c)

Child (b)

Child (d)

authorize the following people, other than the guardians listed on the reverse side of this application, the permission to sign the children listed above in and/or out of East End Kids Academy.

1	Authorized Person (First Last Name)	Relationship to CHILD	Cell Phone #	**Office Use**PIN #
*Address on Photo ID:				
2	Authorized Person (First Last Name)	Relationship to CHILD	Cell Phone #	**Office Use**PIN #
*Address on Photo ID:				
3	Authorized Person (First Last Name)	Relationship to CHILD	Cell Phone #	**Office Use**PIN #
*Address on Photo ID:				
4	Authorized Person (First Last Name)	Relationship to CHILD	Cell Phone #	**Office Use**PIN #
*Address on Photo ID:				
5	Authorized Person (First Last Name)	Relationship to CHILD	Cell Phone #	**Office Use**PIN #
*Address on Photo ID:				
6	Authorized Person (First Last Name)	Relationship to CHILD	Cell Phone #	**Office Use**PIN #
*Address on Photo ID:				

I understand that my signature on this form allows East End Kids Academy to release my child to the person(s) authorized above. Changes to this authorization form are the sole responsibility of the parent/guardian that has signed this form. **No child will be released to anyone without proper notification AND photo identification.**

****Additional Notes as per Parent/Guardian:**

Parent/Guardian Signature:

Date: