

Explore & Soar

SUMMER PROGRAM AT TAYLOR APPLICATION FORM

June 20 - August 12, 2011

For **3-8 years old** (children entering prek through children entering fourth grade)

Hours: M-F, 8:30am - 4:00pm, beforecare 8:00 - 8:30am, aftercare 4:00 - 6:00pm

For more information, please call Mariann at 274-4994

CHILD'S NAME	DOB	AGE	
PARENT NAME(S)			
ADDRESS			
EMAIL	HOME PHONE	DAY PHONE	CELL
EMERGENCY CONTACT #1	PHONE	RELATIONSHIP	
EMERGENCY CONTACT #2	PHONE	RELATIONSHIP	

Please check the summer program sessions your child will be attending:

Dates	Weekly Theme	8:30am-4pm	8am-4pm	8:30am-6pm	8am-6pm
6/20 - 6/24	YOUNG ARTISTS	<input type="checkbox"/> \$210/week	<input type="checkbox"/> \$230/week	<input type="checkbox"/> \$250/week	<input type="checkbox"/> \$270/week
6/27 - 7/1	THEME-A-DAY	<input type="checkbox"/> \$210/week	<input type="checkbox"/> \$230/week	<input type="checkbox"/> \$250/week	<input type="checkbox"/> \$270/week
7/5 - 7/8	STARS AND STRIPES	<input type="checkbox"/> \$170/week	<input type="checkbox"/> \$185/week	<input type="checkbox"/> \$200/week	<input type="checkbox"/> \$215/week
7/11 - 7/15	SUPER SCIENCE	<input type="checkbox"/> \$210/week	<input type="checkbox"/> \$230/week	<input type="checkbox"/> \$250/week	<input type="checkbox"/> \$270/week
7/18 - 7/22	FUN AND GAMES	<input type="checkbox"/> \$210/week	<input type="checkbox"/> \$230/week	<input type="checkbox"/> \$250/week	<input type="checkbox"/> \$270/week
7/25 - 7/29	AUTHOR-A-DAY	<input type="checkbox"/> \$210/week	<input type="checkbox"/> \$230/week	<input type="checkbox"/> \$250/week	<input type="checkbox"/> \$270/week
8/1 - 8/5	MIGHTY MATH	<input type="checkbox"/> \$210/week	<input type="checkbox"/> \$230/week	<input type="checkbox"/> \$250/week	<input type="checkbox"/> \$270/week
8/8 - 8/12	CELEBRATE SUMMER!	<input type="checkbox"/> \$210/week	<input type="checkbox"/> \$230/week	<input type="checkbox"/> \$250/week	<input type="checkbox"/> \$270/week

Drop-In Aftercare - \$10 per day, 4:00pm - 6:00pm. **Deposit:** \$50 per week to hold your spot is non-refundable.

_____ **Total Weeks x \$50 =** _____ **Due with registration.** Confirmation email with balance due will be sent.

Lunch

\$3.50/day - Send lunch order form with registration.

Health Concerns (allergies, physical limitations, sun sensitivity, etc.)

Is your child identified by your school district as having special needs? Yes No

PAYMENT:

CHECK: Enclosed is a check for _____ weeks x \$50 deposit = \$_____ made payable to The Taylor School.

CREDIT CARD PAYMENT: _____ weeks x \$50 deposit = \$_____

NAME	CREDIT CARD NUMBER	
EXPIRATION DATE	VERIFICATION NUMBER	SIGNATURE

MAILING ADDRESS: Susan Odell Taylor School • Explore & Soar Summer Program • 116 Pinewoods Avenue, Troy, NY 12180

For Office Use Only: Date Deposit Received: _____ Amount: _____ Cash Check# _____ C.C.
Date Balance Received: _____ Amount: _____ Cash Check# _____ C.C.