



# SUMMER DEPOT 2019

Tuesdays & Thursdays 12 days

June 11, 13, 18, 20, 25, 27 July 2, 3 (Wed), 16, 18, 23, 25,

Date Received \_\_\_\_\_ Spreadsheet \_\_\_\_\_

\_\_\_\_\_ \$25 Reg. Fee (per child) \_\_\_\_\_ ACS

Amount Paid \_\_\_\_\_ Check # \_\_\_\_\_

**1st Child:** \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Full Name: (First) (Middle) (Last) Name your child prefers Birth date

Pertinent Allergies M F Special requests/needs for your child  
Important medical or behavioral information to help your child be successful: \_\_\_\_\_

**Circle:** A (8 weeks-12 mos), B (13-18 mos), C (19-24 mos)  
(9:00-1:00)

Same class child was in for 2018-2019 school year.

**\$225 for the summer**  
Early Bird (8:00-9:00) \_\_\_\_\_ + \$72

**Circle:** Pre-K 2, Pre-K 3, Pre-K 4, K-1-2(9:00-12:00)  
(2 by Sept 1, 2018, exiting/leaving learning grade)

**\$200 for the summer**  
Early Bird (8:00-9:00) \_\_\_\_\_ + \$72  
Lunch Bunch (12:00-1:00) \_\_\_\_\_ + \$72

**2nd Child:** \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Full Name: (First) (Middle) (Last) Name your child prefers Birth date

Pertinent Allergies M F Special requests/needs for your child  
Important medical or behavioral information to help your child be successful: \_\_\_\_\_

**Circle:** A (8 weeks-12 mos), B (13-18 mos), C (19-24 mos)  
(9:00-1:00)

Same class child was in for 2018-2019 school year.

**\$225 for the summer**  
Early Bird (8:00-9:00) \_\_\_\_\_ + \$72

**Circle** Pre-K 2, Pre-K 3, Pre-K 4, K-1-2 (9:00-12:00)  
(2 by Sept 1, 2018, exiting/leaving learning grade)

**\$200 for the summer**  
Early Bird (8:00-9:00) \_\_\_\_\_ + \$72  
Lunch Bunch (12:00-1:00) \_\_\_\_\_ + \$72

**1st Child** \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_ = \_\_\_\_\_  
Class Tuition Reg Fee (\$25) Early Bird Lunch Bunch Total Fee for Summer Depot

**2nd Child** \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_ = \_\_\_\_\_  
Class Tuition Reg Fee (\$25) Early Bird Lunch Bunch Total Fee for Summer Depot

**Mom's First & Last Name:** \_\_\_\_\_ **Employer:** \_\_\_\_\_

**Dad's First & Last Name:** \_\_\_\_\_ **Employer:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Mom's Cell #:** \_\_\_\_\_ **Dad's Cell #:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Emergency Contact: Name** \_\_\_\_\_ **#** \_\_\_\_\_

**Medical Release** In enrolling my child (children) in the Summer Depot Ministry at Temple Baptist Church of Hattiesburg, MS, I understand that Temple Baptist Church (TBC) assumes no responsibility for sickness or injury which may occur while my child (children) is (are) in attendance at the Summer Depot. As a condition of enrollment of my child (children) in Summer Depot, I hereby relieve and release TBC and its employees from any and all liability for injury or sickness which may occur for any cause while my (our) child (children) is (are) in this program. In order to meet all legal requirements, I hereby authorize a representative of TBC to give consent for any and all necessary medical care for my child (children) while in TBC's custody.

**Parent's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_