



Seed Song Center REGISTRATION FORM

Seeds to Sprouts Program- Fall 2021

Join us as the incredible vegetable bounty of September sets in! Each week we will experience the abundance of life on the farm during the fall months. Together we will harvest and share simple and delicious farm-fresh snacks, frolic with the friendly farm animals, and adventure in the gardens, vegetable fields, and forests. We will sing songs, share stories, explore with our five senses, stretch our legs and work together on nature crafts.

6 Consecutive Wednesdays from September 15th to October 20th. 10 AM- 12 PM
Open to ages 2, 3, and 4 with a Parent or Caregiver

We have rolling admission until programs are full, which often happens quickly. Register early!

Part A: Child and Parent/Guardian Information

Please fill out a separate form for each child attending

Name of child (l,f): _____ **Age:** _____

Date of Birth: _____ **Gender:** _____

Name of accompanying parent/guardian (l,f): _____

Phone: **mobile:** _____
 work: _____

Email: _____

Mailing address: _____

How did you hear about our program? _____

Does your child have any allergies? Please list them.

Please also provide other medical/dietary/behavioral information you'd like us to know about your child, including a copy of IEP if applicable.

"I permit Seed Song Center to take photos, videos, and sound clips of my child(ren) and my child(ren)'s projects at camp, and to use them at their discretion."

(sign): _____ (print name:) _____ date: _____

Please provide a paper copy of the child's immunization history when submitting your application, or bring prior to the child's first day of camp.

Subpart 7-2 of the New York State Sanitary Code requires camps to maintain immunization records for all campers which includes dates for all immunizations against diphtheria, haemophilus influenza type b, hepatitis b, measles, mumps, rubella, poliomyelitis, tetanus and varicella (chickenpox). The record must be kept on file for every camper and updated annually.

Please also provide other medical/dietary/behavioral information you'd like us to know about your child, including attaching a copy of any applicable treatment plans or IEP:For NYS laws regarding summer camps, see link at www.seedsonfarm.org/about-camp.html

Part B: Attendance and Payment Information for Fall Seeds to Sprouts Programs

Every Wednesday, for 6 consecutive weeks from 10 AM- 12 PM

Full season: \$150

****A caregiver must be present throughout the duration of the program****

Wednesday, September 15 * Wednesday, September 22 * Wednesday, September 29

Wednesday, October 6 * Wednesday, October 13 * Wednesday, October 20

Extreme and severe weather date: October 27th

***Please Forward our camp information to friends that may be interested:
www.SeedSongFarm.org/seeds-to-sprouts***

An essential part of our mission is to make our healthy farm experiences available to ALL

*Make a tax-deductible contribution to **Low-Income & Immigrant Camper Fund** (optional) _____*

*Make a tax-deductible contribution to **Camp Program Expansion Fund** (optional): _____*

METHOD: []Paypal []Check # _____
[]Cash []Other _____

GRAND TOTAL : _____

Please e-mail or drop-off registration, medical, & covid forms to the address below:

Please pay via the Paypal link at www.seedsonfarm.org/seeds-to-sprouts or drop off a check payable to 'Seed Song Center' to:

Seed Song Center, 160 Esopus Ave, Kingston, NY 12401

Please proceed to the COVID-19 agreement on the next page

Parent COVID Agreement Form

To ensure that every child has a safe, fun, and meaningful an experience as possible at Seed Song Center's Farm Camp, for the time being, we require every parent to print and sign the following Covid Agreement Form and submit it with registration.

Please take your child's temperature & check their symptoms at home before arriving at the farm each day. Their temperature must be below 100.3 degrees F, and your child must not exhibit any of the symptoms below:

Signs and symptoms of COVID-19: (compiled from WHO checklist)

- ~Shortness of breath ~Loss of taste or smell
- ~Chest tightness ~Dry cough
- ~Temp over 100.3 ~Aches and pains

Ulster County COVID-19 Hotline: **845-443-8888**

Monday – Saturday | 9:00 AM – 5:00 PM

NYS Coronavirus Info Hotline: **888-364-3065**

Collective Agreement with Seed Song Center camp staff and families:

“By sending my child to Seed Song Center's camp, I pledge that my family's habits outside of camp will be transparent and safe on behalf of all camp families and staff. While my child(ren) attend(s) camp and for one week prior, my family and/or housemates will keep as safe a distance as practicable from any source of potential contagion.

If anyone in my home or my child(ren)'s home experiences an above-listed symptom of COVID-19 or has had contact with a known positive case in the last 14 days, we will not send our child(ren) to camp until we have gotten a negative test. I am aware that my actions at home could seriously impact essential workers and other camper families.

My child will bring a mask to camp each day and will need to wear it whenever they are in an enclosed or shared space. I will ensure that the person that drops off and picks up my child wears a mask at these times and follows this agreement.

I understand that in order to serve families, Seed Song Center has committed resources to the camp program and staff even knowing the risk that camps may be shut down by New York State, or that one camp group may become infected and need to stay at home. I will share in this risk and am aware that camp fees can not be refunded in the case of a shut-down, as well as in the case of any child(ren) illness in which the child's space can not be filled from a waiting list.”

Name of Parent(s)/ Guardian(s) (please print): _____

X _____ Date: _____

X _____ Date: _____

[signature(s)]

