

Seed Song Center Registration Form

For Summer on the Farm! Programs at Seed Song Farm

Part A: Child and Parent/Guardian Information

please fill out a separate form for each child attending (skip all duplicate information)

name of child (l,f): _____ Age: _____ Gender: _____

name of contact parent/guardian (l,f): _____

phone: mobile: _____ home: _____ work: _____

email: _____

mailing address: _____

Applicants to Wednesday programs for 3-4 yrs and younger, please skip to Part B

name of other parent/guardian if applicable: _____

phone: mobile: _____ home: _____ work: _____

email: _____

address: _____

Name of Other that may pick up child: _____

phone: mobile: _____ home: _____ work: _____

Emergency Contact: name: _____ phone(s): _____

medical/dietary/behavioral/other information you'd like us to know about your child, including attaching a hard copy of any applicable treatment plan(s):

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. Specifically:

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 continue to Part B: Attendance and Payment Information ---->

Seed Song Farm & Center

REGISTRATION FORM for Summer on the Farm! Programs

Part B: Attendance and Payment Information

Note: We've received funding to make our camp program available to families of all income levels. Please don't let cost prevent your child from attending-- contact us.

<u>Date</u>	<u>Time</u>	<u>Description</u>	<u>Ages</u>	<u>Cost</u>	<u>Amount</u>
M-F 7/2-7/6	9:00-3:00	FIRE wind water WORKS	5 & up	\$325	_____
Weds 7/4	2:30-4:30	FIRE wind water WORKS	3-4	\$20	_____
M-F 7/9-13	9:00-3:00	SuperPlants of Farm & Forest	5 & up	\$325	_____
Weds 7/11	2:30-4:30	SuperPlants of Farm & Forest	3-4	\$20	_____
M-F 7/16-20	9:00-3:00	Esopus Village Back in Time	5 & up	\$325	_____
Weds 7/18	2:30-4:30	Esopus Village Back in Time	3-4	\$20	_____
M-F 7/30-8/3	9:00-3:00	Theme TBD	5 & up	\$325	_____
Weds 8/1	2:30-4:30	Theme TBD	3-4	\$20	_____
M-F 8/6-10	9:00-3:00	Theme TBD	5 & up	\$325	_____
Weds 8/8	2:30-4:30	Theme TBD	3-4	\$20	_____
M-F 8/13-17	9:00-3:00	Theme TBD	5 & up	\$325	_____
Weds 8/15	2:30-4:30	Theme TBD	3-4	\$20	_____
M-F 8/20-24	9:00-3:00	Theme TBD	5 & up	\$325	_____
Weds 8/22	2:30-4:30	Theme TBD	3-4	\$20	_____
M-F 8/27-31	9:00-3:00	Theme TBD	5 & up	\$325	_____
Weds 8/29	2:30-4:30	Theme TBD	3-4	\$20	_____

Make a tax-deductible contribution to our scholarship fund (optional): _____

Make a tax-deductible contribution to grow our programs (optional): _____

GRAND TOTAL: _____

A minimum deposit (non-refundable) of 50% is required to reserve your child's spot(s).

CURRENT PAYMENT: _____

REMAINING BALANCE: _____

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 for their promotions. (sign:)

(print name:) _____

date: _____

Balance due before the start of the first program child will attend.
Please mail registration forms and check payable to "Seed Song Center" to:
Seed Song Center, 160 Esopus Ave, Kingston, NY 12401