



2020 Summer Program Registration June 8 – June 26

Summer School is coming for 3 to 6 year olds! Choose from Three One - Week Sessions, or Mix and Match weeks!

Student Name: _____ Date of Birth: _____

Sessions & Dates	Days	Time	Session Themes	Fee	Indicate which session(s)
1. June 8 – 12	M-F	8:30 – 12:30	Summer Olympics: Around the World	\$205.00	
2. June 15—19	M-F	8:30—12:30	Space: Traveling through the Solar System	\$205.00	
3. June 22—26	M-F	8:30 – 12:30	S.T.E.A.M: Science, Technology, Engineering, Arts, Math	\$205.00	

Sub Total: _____

Registration/Supply Fee: _____

\$25X Each Session

Total Due: _____

GENERAL INFORMATION: LUNCH IS NOT PROVIDED, so pack a healthy lunch and bring an a.m. snack. Students must be fully potty trained for admittance. ADMISSIONS, ENROLLMENT & CANCELLATIONS: Enrollment is open to MCS students and the general public. There is a \$25.00 non-refundable registration/supply fee per student per session. Fees will not be prorated due to absence, late entry, early departure, or multiple siblings. NO REFUNDS will be given after classes begin, June 8, 2020. Students must be picked up no later than 12:30pm. A fee of \$2.00 per minute per child will be charged for every minute a student remains after their designated pick up time. ALL EMERGENCY MEDICAL RELEASE FORMS MUST be on file before the first day of class. For questions about the Summer Program please contact the preschool office at (858)613-7803.

Parent Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Date: _____ Ck# _____ Payment: _____ Approved by: _____ Class: _____



Sunscreen Utilization Permission Form

Name of Child: _____

Date _____

As the parent or guardian of the above child, I give permission for staff at **Maranatha Christian Preschool** to apply a sunscreen product of SPF 15 or higher to my child as specified below. I understand that sunscreen may be applied to exposed skin, including but not limited to the face, tops of ears, nose and bare shoulders, arms and legs.

I understand that Sunscreen, if needed, will be applied in the afternoon only. I agree to apply sunscreen to my child in the morning before coming to school.

Additionally, I have checked and/or indicated below my directives regarding the type and application of sunscreen.

_____ The Staff of Maranatha Christian Preschool **may use the sunscreen of their choice**, in keeping with applicable federal standards.

_____ The staff of Maranatha Christian Preschool has permission to **only apply a specific type of sunscreen that I will provide for my child**. The bottle is clearly labeled with his/her name. Please list type of sunscreen below:

_____ For medical or other reasons, please do not apply sunscreen to the following areas of my child's body:

_____ The Staff of Maranatha Christian Preschool **may not** put any sunscreen on my child.

Parent's full name (print): _____

Parent's signature: _____