

Stay & Play Club

914-528-5600



Nancy A Brophy, Director

1949 E Main Street, Ste. 2
Mohegan Lake, NY 10547

Registration Form- School Year 2015-2016

Child's Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone Number: _____ Child's Birthdate: ____/____/____

Family Email Address: _____ Male / Female

Elementary School Child attends: _____ Grade as of 9/15: _____

***** Code Number: _____ - _____ - _____

Please write the last four digits of the mother's Social Security #-This will serve as your child's CODE NUMBER for dismissal. Please remember this number.

***** Child's Parents or Guardians *****

Name

Name

Cell #

Cell #

Employer

Employer

Work Number

Work Number

What days will your child attend?

_____ Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday

BEFORE SCHOOL CARE: _____ (opens at 7 A.M.)

AFTER SCHOOL CARE:

Child will be picked up BY: _____ 4 p.m. _____ 5 p.m. _____ 6 p.m. (Facility closes at 6 p.m.)
Slot A Slot B Slot C

Office use only:
Date Received: _____ Confirmed _____ Check # _____ Amount \$ _____ Sibling: _____

Does your child have any allergies?

Does your child have any special needs?

What hobbies does your child enjoy? _____

What are your child's favorite things to do? _____

Would your child be interested in learning a new hobby? ___Y/___N

What type of activity? _____

Is there anything you feel we should know about your child? _____

Did your child attend Tom Thumb Preschool? _____ Yes _____ No

Did/does your child attend Dynamic Gymnastics? _____ Yes _____ No

Did your child attend Tom Thumb's summer camp ("Catch Us If You Can")? _____ Yes _____ No

Did anyone else in your family attend Tom Thumb Programs? _____

Please understand the following:

- 1) The Stay & Play Program follows the Lakeland School District Calendar. On **half days** a special program will be offered at an **additional cost**.
- 2) This is a **well- child facility**. This facility will administer only over-the counter Topical Ointments.
- 3) Please note that it is **impossible** for the Stay & Play Program **to deduct for any absenteeism**.
- 4) Tom Thumb sometimes uses pictures of children in our brochure, newspaper articles and our web site.
- 5) By providing your email address you give permission for Stay& Play/ Tom Thumb to send you notes and other information via email.
- 6) The Stay & Play program and the facility close at 6 p.m., if you **should arrive later that 6 p.m. you will be charged an extra fee**.
- 7) The parent who signs this form will be responsible for payment of all fees. **Payments are due one week before the month begins**.
- 8) **YOUR DEPOSIT OF \$50** which will be applied to September's payment must accompany this form, no registration fee is required.

I have read and agree to the above,

 Print Parent's Name

 Signature