

2021 Spare Time Fun Centre Summer Registration

e-mail: stfc@shawbiz.ca

Child's name: _____

Going into Grade _____

Parent name: _____ phone number: _____

Check attending No or Yes. If yes **circle** the fee for which weeks your child will be attending.

Week	Date	Attending No	Attending Yes	Full day 7:30 am—6 pm	Program 9 am—4 pm	Fee
1	July 5 - 9			\$ 245	\$ 210	
2	July 12 - 16			\$ 245	\$ 210	
3	July 19 - 23			\$ 245	\$ 210	
4	July 26 - 30			\$ 245	\$ 210	
5	Aug 3 - 6 Closed Aug 2			\$ 196	\$ 168	
6	Aug 9 - 13			\$ 245	\$ 210	
7	Aug 16 - 20			\$ 245	\$ 210	
8	Aug 23 - 27			\$ 245	\$ 210	
9	Aug 30 - Sept 3			\$ 245	\$ 210	

Please initial to confirm that you have read the following policies.

Withdrawal Policy: there are **no changes or refunds** for cancellations for any weeks unless we are able to fill your spot, in which case you will receive a full refund. There will be no refunds or credit for days not attended.

Sub total

ACCB (subsidy)

Summer fee total

Late fee policy: There will be a late fee charged (\$15/30 min), to be paid by the end of the week, if a child/ren is picked up after 4 pm on Program weeks or after 6 pm on Full day weeks.

Payment	Date	Amount	Date	Amount
Cheque				
E-transfer				
Cash				

Parent / guardian signature _____

Date _____

Please check and sign these 4 contracts

Expectations

- I have read, signed and returned the Daily Health Check Resource sheet included with the summer registration. I will initial the Daily Health Check sign-off each day that my child attends the centre.
- I understand my child cannot attend if he / she is sick.
- I will call the centre by 10 am if my child will be late or absent.
- I will tell the centre if my child is going to be picked up early.
- I understand my child should not bring candy, gum, toys, money or electronic devices for play.
- I understand cell phones and other electronic devices will be kept in the centre office upon arrival and will be returned to my child when he / she is picked up or ready to leave on his / her own.

Parent/guardian signature _____ Date _____

Photo consent

I understand photographs may be taken of my child. I give consent for his / her photographs to be:
 displayed at the centre used for promotional material posted on Spare Time's website

Parent/guardian signature _____ Date _____

Sunscreen

Spare Time staff may administer spray sunscreen (supplied by the centre) to my child as needed.
 I will send spray sunscreen with my child and I understand that Spare Time will encourage my child to reapply the sunscreen as necessary.

Parent/guardian signature _____ Date _____

Parent / guardian agreement

I understand I must read the Parent Manual. I may find it online at www.sparetimefuncentre.com under the Parent Information box or I may ask for a paper version of the office. I agree to comply with the policies of the Parent Manual. I have read the discipline guidelines and methods used by the centre and I will support the centre staff in decisions made during centre hours. The centre staff must be informed of any event or change or routine at home which might affect my child's behavior. I give my child permission to participate in all of the program summer activities.

Restrictions are _____

Parent/guardian signature _____ Date _____