



**BEDFORD LEARNING CENTER
JUNE BUGS at ST MATTHEWS
2023 REGISTRATION**

Child's Name _____ Birthdate _____

Please circle class entering: 2's class 3's class 4's class or Kindergarten in Sept 2023

Address _____

Home Phone _____ Email Address _____

Mom's Cell Phone _____ Dad's Cell Phone _____

Mom's Work Phone _____ Dad's Work Phone _____

Primary Emergency Contact (other than parents or guardian)

Name: _____ Home Phone: _____

Work Phone: _____ Relationship to Child: _____

Address: _____

Emergency Information

1. Child's Physician: _____ Phone: _____

2. Preferred Hospital: _____

3. Child's Dentist: _____ Phone: _____

4. Medicine allergic to _____

5. Food Allergies: _____ Epi-pen? _____

6. Any other Allergies: _____

7. Immunization Record: Up to date? _____

8. Any special health conditions: _____

JUNE BUGS: This mini-camp session is a fun-filled time for children aged 2- 5 years old. The children will explore water activities, art and crafts, nature, music, dramatic play, games, storytelling, science, and outdoor play. The incoming 2's will be placed in the current 2's classroom. The outgoing 2's will be in the current 3's' classroom. The downstairs 4's room will have the 3's/4's children. Staff is hired based on enrollment; we are therefore unable to offer refunds for withdrawal or absence of any kind.

_____ June 12-16: 9:00 AM - 12 PM 5 days \$350.00/Week

_____ June 19-23: 9:00 AM - 12 PM 5 days \$350.00/Week

_____ June 26-30: 9:00 AM - 12 PM 5 days \$350.00/Week

- Deposit included with registration form: \$350.00
- Total Fees Enclosed with Registration form: \$ _____
- Deposit-non-refundable by May 1st (Balance due May 1)
- Please make checks payable to The Bedford Learning Center

Camper Information

Is there anything else you would like the staff to know about your child?

I give my permission for the following people to pick up my child from June Bugs in addition to myself and my spouse/my child's other parent:

Parent/Guardian Signature _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

PERMISSION SLIP

Camper's Name: _____

I give my permission for the Bedford Learning Mini Camp Staff to apply the suntan lotion I send in for my child during the day.

Parent/Guardian Signature: _____

- ✓ I give permission for Bedford Learning to photograph of my child and share photos on BLC's Facebook page. Please intial here: _____



Limited Space for Enrollment. Register Early!

Each year we have a waiting list.

Please send form and check to:

Susan Ross 201 West Main Street. Mt. Kisco, NY 10549