

**St. John's Lutheran Church Early Childhood Center**

**1 Van Roo Avenue**

**Merrick, NY 11566**

EMAIL: [ecc@stjohnsmerrick.org](mailto:ecc@stjohnsmerrick.org)

**(516) 378-4322**

**Summer 2025 Registration Form**

\*Child must turn 2 by December 1, 2025

**Dates:** Monday, June 30<sup>th</sup> - Thursday, August 7<sup>th</sup>

**Times:** 9:00 AM – 11:00AM, Tuesday/Thursday

**Cost of Program:** \$100 Per week

\$75 Non-Refundable Registration Fee

Summer Camp Tuition Cost: \$600

10 % discount if attending all 6 weeks, Cost: \$540

5% sibling discount.

Payment in full due by 6/15/25

**Program Details:** Each week has a different fun theme with which the activities, stories, songs, finger plays, and crafts are planned around.

In addition, we offer outdoor playtime each day in our playground and in our play area with sprinklers, water tables, sand tables, tricycles, sidewalk chalk, bubbles, and outdoor sports equipment including basketball.

Students receive a peanut free snack, ice pop and access to water throughout the day.

**Please check the week(s) you will be attending:**

<u>Weeks:</u>	<u>Theme:</u>	<u>Cost:</u>
_____ Week #1 July 1,3	Patriotic	Cost: \$100
_____ Week #2 July 8, 10	Down by the Sea	Cost: \$100
_____ Week #3 July 15, 17	Let's Get Buggy	Cost: \$100
_____ Week #4 July 22, 24	Going on Safari	Cost: \$100
_____ Week #5 July 29, 31	Teddy Bear Friends	Cost: \$100
_____ Week #6 August 5, 7	Sports Week	Cost: \$100

**Total # of Weeks Attending:** \_\_\_\_\_ **Total Cost:** \_\_\_\_\_

Child's Name: \_\_\_\_\_ Male/Female (Circle One)

Preferred Name to be called: \_\_\_\_\_

Child's Date of Birth: \_\_\_\_\_

Known Allergies: \_\_\_\_\_

Challenging Behaviors: \_\_\_\_\_

Parent's Names: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mom's Home Phone: \_\_\_\_\_ Dad's Home #: \_\_\_\_\_

Mom's Cell Phone: \_\_\_\_\_ Dad's Cell #: \_\_\_\_\_

Mom's E-mail Address: \_\_\_\_\_ Dad's Email: \_\_\_\_\_

Do you want both parents to receive email notifications: \_\_\_\_\_ Yes \_\_\_\_\_ No

Emergency Contact if parent cannot be reached:

(You must supply two local contacts)

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Relation to the Child: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Relation to the Child: \_\_\_\_\_

May we use appropriate photos of your child on our school Facebook and Instagram pages?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

**Health/Immunization Records:** *If you currently attend and have an up-to-date record file, there is no need to supply new forms. If you are new to St. John's Lutheran Church Early Childhood Center, visit our website, [stjohnmerrick.org](http://stjohnmerrick.org) to download, complete, and return your child's forms prior to the start of the Summer Program or call the office at 516-378-4322 to have forms sent to you.*

**Declaration of Non-Discrimination:** *St. John's Early Childhood Center admits students of any race, religion, color, nationality or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, religion, color, nationality or ethnic origin in admissions policies.*

Revised 01/24/25