

GNPS-2017 Summer Before and After Camp Child Care Program

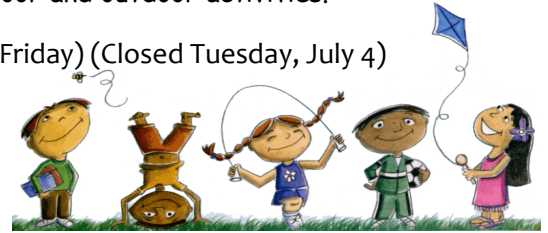
The Before and After Camp Child Care program is available to registered district student campers entering Grades K-5 and will be located at Lakeville and Saddle Rock School. Children who attend the Allenwood/E.M. Baker camp program may attend the Summer Child Care Program at Saddle Rock School. Parents/caregivers are responsible for transporting their children each day to the before camp child care program and for pick-up at the end of the day from the after camp child care program. The school district will transport children between the Child Care Program at Saddle Rock School and the Allenwood/E.M. Baker camp site.

Children will be supervised and involved with various indoor and outdoor activities.

Dates: Monday, July 3, 2017 through Friday, August 11, 2017 (Monday-Friday) (Closed Tuesday, July 4)

Hours: Before Camp Child Care Hours: 7:00 AM to 9:15 AM
After Camp Child Care Hours: 3:15 PM to 6:30 PM

Locations: Lakeville School & Saddle Rock School



Rates: **FULL TIME:** AM & PM: \$695.00 (7:00 AM-9:15 AM) & (3:15 PM-6:30 PM)
(6-Weeks) AM Only: \$288.00 (7:00 AM-9:15 AM)
PM Only: \$438.00 (3:15 PM-6:30 PM)

PART TIME: AM & PM: 417.00 (7:00 AM-9:15 AM) & (3:15 PM-6:30 PM)
(3-Weeks) AM Only: \$175.00 (7:00 AM-9:15 AM)
PM Only: \$252.00 (3:15 PM-6:30 PM)

Rate for each additional week after 3 weeks.

AM & PM: \$139.00 (7:00 AM-9:15 AM) & (3:15 PM-6:30 PM)
AM Only: \$62.00 (7:00 AM-9:15 AM)
PM Only: \$88.00 (3:15 PM-6:30 PM)

Registration deadline: Friday, June 2.

No refunds will be made after Friday, June 2, 2017. There will be a \$25.00 fee for each refund issued prior to June 2. **10% discount for siblings. Mail-in registration only. Program may be cancelled due to low enrollment.**

For additional inquires, contact the Recreation Office at 441-4045.

Return to: Great Neck Public Schools - Summer Camp/Recreation Office, 345 Lakeville Road, Great Neck, New York 11020

tear off

tear off

PLEASE PRINT:

Student's Name _____ Birth Date _____ Age _____ Entering Grade (9/2016) _____

Address _____ Home Phone # _____ Cell # _____

Emergency Contact Name _____ Emergency Contact # _____

Medical/Health Concerns _____

Parent/Legal Guardian Signature _____ Date _____

My child is registered for Camp at (Please circle one): **Saddle Rock** **Lakeville** **Allenwood/EMB**

What are the dates/weeks your child is registered for at camp _____

My child will attend: Before Camp Program After Camp Program Before & After Care Program

Please make checks/money orders payable to "Great Neck Public Schools."

Total fee amount: \$ _____

No Refunds after Friday, June 2, 2017

Credit Card Number:

() VISA () MasterCard

Expiration Date: _____ **Card Holder's Name** (as it appears on credit card) _____

Signature* _____ *Authorizes 2% credit card transaction fee.