

EXTENDED CARE INFORMATION

Children who are on our grounds during the summer must be signed in and out by a parent/guardian in order to be safely accounted for. Please identify any person(s) other than the parent(s) who is/are authorized to pick up your child:

Name: _____ Relationship: _____ Contact info: _____

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I acknowledge that my child may only be picked up by a parent/guardian or by an individual for whom Brookfield School has a release form on file. All persons may be required to show photo identification at the time of pick up.

(Parent/Guardian's Signature)

(Date)

AUTHORIZATION FOR USE OF PHOTOS

I hereby give Brookfield School permission to allow school or professional photographers to take pictures or film of my child. I understand that this may also include parents from the school taking pictures at school parties or special events, and that some of these photos will be used on Brookfield School display boards and website pages.

YES My child *may* be photographed. _____

NO My child *may not* be photographed. _____

SESSION SIGN-UP

Brookfield's Summer Camp includes up to 12 formal class options (six for younger students and six for older students) during each two-week period. The cost for full days is \$580; the cost for half days is \$350. Small group tutoring by our superb teachers is \$30/hour for camp students. No refunds or adjustments will be given for partial attendance due to sickness, vacations, withdrawal, or suspension due to poor behavior. The following discounts are available (please check):

___ 10% discount for three or four session sign-up

___ 10% discount for early-bird sign-up and pre-payment before May 18 (forms and deposit required)

My child will attend the following two-week camps:

___ June 17 – June 28 ___ Full Day 7:30 – 6:00 ___ Half Day 7:30 – 12:30 ___ Half Day 12:30 – 6:00

___ I would like tutoring in Subject _____ for ___ # hours/week

___ July 1 – 12 (no July 4th) ___ Full Day 7:30 – 6:00 ___ Half Day 7:30 – 12:30 ___ Half Day 12:30 – 6:00

___ I would like tutoring in Subject _____ for ___ # hours/week

___ July 15 – 26 ___ Full Day 7:30 – 6:00 ___ Half Day 7:30 – 12:30 ___ Half Day 12:30 – 6:00

___ I would like tutoring in Subject _____ for ___ # hours/week

___ July 29 – Aug 9 ___ Full Day 7:30 – 6:00 ___ Half Day 7:30 – 12:30 ___ Half Day 12:30 – 6:00

___ I would like tutoring in Subject _____ for ___ # hours/week

By signing below, you indicate that you have read and agree to the following:

I/we agree to abide by the policies and procedures of Brookfield School while enrolled in Summer Camp. I/we also understand that a payment by check may be processed electronically and a cancelled check will not be returned.

Parent Signature #1 _____

Parent Signature #2 _____

As a non-religious school, Brookfield School welcomes students of all races, religions, and national or ethnic origins. Families come in many variations, and Brookfield welcomes all who qualify academically.