



The Teddy Bear Club

Summer Program Application

For Camp Use Only:

Date Application Received: _____

Date of Admission: _____

Age at Admission: _____

Date: _____

Child Information

Child's First Name: _____ Child's Last Name: _____

Date of Birth: _____ Place of Birth: _____

Home Address: _____ City _____ Zip _____

Home Phone: _____ Primary Language: _____

Eye Color: _____ Hair Color: _____ Gender: _____

Height: _____ Weight: _____ Race: _____

Identifying Marks: _____ Allergies: _____

Parents Information

Father's Name: _____

Mother's Name: _____

Home Address: _____

Home Address: _____

City _____ *if different from above*
Zip _____

City _____ *if different from above*
Zip _____

Home Phone: _____

Home Phone: _____

Cell Phone: _____

Cell Phone: _____

Occupation & Title: _____

Occupation & Title: _____

Employer's Name: _____

Employer's Name: _____

Business Address: _____

Business Address: _____

City _____ Zip _____

City _____ Zip _____

Business Phone: _____

Business Phone: _____

Blackberry / Pager: _____

Blackberry / Pager: _____

E-mail: _____

E-mail: _____

Other: _____ *please print*

Other: _____ *please print*

Parents: Married Separated Divorced Deceased _____ Other _____

if father remarried, stepmother's name _____

if mother remarried, stepfather's name _____

Program Enrollment

Please place a ✓ in the boxes below to indicate the session(s) for which you wish to enroll your child.

	Session 1	Session 2	Session 3
Morning Session			
Afternoon Session			
Full-Day Session*			

*Please note that our full-day session is only available to children ages 3 and up

Please check this box if you wish to sign up for Early Drop-off

Once your choice has been made, please remember to write your choice of sessions on your calendar.

Enrollment Agreement

Must be signed by parent or guardian

- The required deposit of \$400 is enclosed and I agree to pay the balance of the summer program tuition on or before April 15th.
- I understand that my child may not attend unless The Teddy Bear Club receives a completed Health Form by June 1st.
- I understand and accept The Teddy Bear Club policies concerning non-refundable deposits and non-refundable tuition as well as terms of enrollment described in The Teddy Bear Club Summer Program brochure.
- I understand that once an application is accepted by The Teddy Bear Club, no funds or transfer of funds will be made for withdrawal, dismissal, failure to attend or incomplete attendance.
- I understand that The Teddy Bear Club may cancel my child's reservation if the full balance of the tuition has not been received by April 15th.

Name of Parent or Guardian: _____

Signature: _____

Date: _____

Please return this application form and the registration deposit to:

The Teddy Bear Club Summer Program
1466 Commonwealth Avenue
West Newton, MA 02465

Any questions, please contact us at:

Telephone: 617-332-1611 - Fax: 617-332-1661 - Email: tbc@teddybearclub.org