

Northwest Children's School

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2025 Summer Camp Application

June 23rd through August 14th 2025

Child's First Name

Last Name

____/____/____
Date of Birth



<< Use this QR code to pay your one-time, non-refundable \$25 Registration Fee!

Use this QR code to securely upload your application >>>>

OR type the link below into any browser:

<https://www.dropbox.com/request/vQPXP8jHfUDlcGLISiHw>



How did you hear about us? Facebook Web Search Referred Other (_____)

Referrals - list the **student** first & last name for their \$20 referral credit: _____

For Office Use Only

Week(s): 1 - PT / FT | 2 - PT / FT | 3 - PT / FT | 4 - PT / FT | 5 - PT / FT | 6 - PT / FT | 7 - PT / FT | 8 - PT / FT

Registration Paid: Yes / No

STUDENT INFORMATION:

Name: _____ Birthdate: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Is English a Second Language? YES / NO | If YES, what is their Primary Language? _____

Does he/she have allergies or prescribed medications? YES / NO | If yes, please explain: _____

Does your child have an EPI Pen* for allergies listed above? YES / NO

*EPI Pens must be kept on site with proper medical documentation. Contact the office for details.

PRIMARY EMAIL: _____

Northwest Children's School will send communications to this email including enrollment information, tuition invoices, school updates, etc.

PARENT INFORMATION:

Mother's Name: _____ **Contact: 1st / 2nd**

Address (if different from above): _____ State _____ Zip _____

Cell Phone: _____ Social Security #: _____

Employer & Phone: _____

Father's Name: _____ **Contact: 1st / 2nd**

Address (if different from above): _____ State _____ Zip _____

Cell Phone: _____ Social Security #: _____

Employer & Phone: _____

Parent Relationship Status: Together Separated Parenting Plan/Custody Agrmt* Other**

**Please note, for separated parents with a court issued parenting plan or custody agreement, we require a copy to ensure we are following the agreement. Unless stated in a court issued document, we are not legally allowed to keep a child from a parent. **Other – may include restraining order or any other court issued document outlining visitation/guardianship limitations.*

Legal Guardianship:

Guardian's Name: _____ **Contact: 1st / 2nd**

Address (if different from above): _____ State _____ Zip _____

Cell Phone: _____ Social Security #: _____

Employer & Phone: _____

EMERGENCY CONTACT INFO:

INCLUDING PARENTS, please list names and phone numbers in **ORDER** of who we should call.

<u>First & Last Name</u>	<u>Phone</u>	<u>Relationship</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

PICK-UP AUTHORIZATION LIST: Please list names, phone number & relationship for all who are authorized to pick up your student (*excluding parents*). Please note, everyone will be required to bring photo id the first time they pick-up so that we may photocopy for our records as a safety precaution. All persons authorized must be at least 18 years of age.

<u>First & Last Name</u>	<u>Phone</u>	<u>Relationship</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

CONSENT FOR EMERGENCY TREATMENT

Child Name: _____ Birthdate: _____

Address: _____ City: _____ State: _____ Zip: _____

Allergies: _____

Current Medications: _____

Mother's Name: _____ Phone: _____

Father's Name: _____ Phone: _____

Legal Guardian Name: _____ Phone: _____

Student's Doctor: _____ Phone: _____

Dr. Facility Name & Address: _____

As the child's parent(s) and/or legal guardian, I/We hereby give my/our consent that _____ (*further referred to as "child"*) may be given emergency treatment by a CPR/First Aid certified staff member at Northwest Children's School LLC. I/We give my/our consent for my/our child to be treated on Northwest Children's School LLC's premises by qualified EMT's and/or Emergency Medical Services as dispatched by 911; and to be transported by emergency vehicle services to a necessary health facility for treatment. In the event *Mother, Father, or Legal Guardian* as listed above cannot be reached by phone, I/We further consent to any and all care to be performed by a licensed doctor and/or hospital when deemed medically and/or immediately necessary by the doctor or emergency services to safeguard the child's health. I/We understand that NW Children's School is no longer responsible for my/our child once he/she is taken into care by emergency services, a doctor, or medical facility.

Parent Signature (or Legal Guardian) **Date**

SUNSCREEN AUTHORIZATION / WAIVER FORM

Parent/Guardian permission is required for all sunscreen applications. Sunscreen products are applied to provide protection from the sun's UV rays. Northwest Children's School follows Snohomish County Health Department guidelines regarding sunscreen.

1. Acceptable sunscreens will be broad-spectrum with an SPF of 30 or higher.
2. Sunscreen will be applied at least 20-30 minutes prior to going outside.
3. Parents are encouraged to send a wide-brimmed hat for added protection outside.
4. Sunscreens will be stored at room temperature and out of reach of children.

Child Info:

First & Last Name: _____

Date of Birth: _____

Northwest Children's School's approved sunscreen information:

Style: Aerosolized Spray

SPF: 30 or higher

Active Ingredient: Zinc Oxide or Titanium Dioxide (mineral-based sunscreens, *oxybenzone & octinoxate free*)

I understand

_____ I authorize Northwest Children's School to apply the use of school provided sunscreen as listed above and understand sunscreen will be applied to exposed skin, which may include face, ears, arms, shoulders, legs, and feet.

_____ I **do not** authorize Northwest Children's School to apply school provided sunscreen to my child and will instead send my own aerosolized sunscreen bottle labeled with my child's name. I **do authorize** Northwest Children's School to apply sunscreen to my child using my personally provided sunscreen; which will be applied to exposed skin, which may include face, ears, arms, shoulders, legs, and feet.

Parent Signature (or Legal Guardian)

Date

CLASS SELECTION

Please put an "X" in the box next to the "full" or "half" days you are registering for. Once completed please return the application with your \$25 non-refundable registration fee (per child) to the school office.

Weekly Sessions & Rates

Week 1 – Mon-Thurs June 23 - 26

- Full Days 9am – 3pm; Tuition \$400/wk
- Half Days 9am – 12pm; Tuition \$210/wk

Week 2 – Mon-Thurs June 30 - July 3

- Full Days 9am – 3pm; Tuition \$400/wk
- Half Days 9am – 12pm; Tuition \$210/wk

Week 3 – Mon-Thurs July 7 - 10

- Full Days 9am – 3pm; Tuition \$400/wk
- Half Days 9am – 12pm; Tuition \$210/wk

Week 4 – Mon-Thurs July 14 - 17

- Full Days 9am – 3pm; Tuition \$400/wk
- Half Days 9am – 12pm; Tuition \$210/wk

Week 5 – Mon-Thurs July 21 - 24

- Full Days 9am – 3pm; Tuition \$400/wk
- Half Days 9am – 12pm; Tuition \$210/wk

Week 6 – Mon-Thurs July 28 - 31

- Full Days 9am – 3pm; Tuition \$400/wk
- Half Days 9am – 12pm; Tuition \$210/wk

Week 7 – Mon-Thurs Aug 4 - 7

- Full Days 9am – 3pm; Tuition \$400/wk
- Half Days 9am – 12pm; Tuition \$210/wk

Week 8 – Mon-Thurs Aug 11 - 14

- Full Days 9am – 3pm; Tuition \$400/wk
- Half Days 9am – 12pm; Tuition \$210/wk

Early Bird Rates: Register by 5/15/25 and receive a \$20 discount on each weekly session selected on your application!

3-year-old applicants are only eligible for half days.

Full day participants: Please send your child with a water bottle on Monday's, to be returned home on Thursdays. Please also pack a lunch. Please label your child's lunchbox and water bottle.

Half day participants: Please send your child with a water bottle on Monday's, to be returned home on Thursdays. Please label your child's lunchbox and water bottle.

Discounts

Multi-Week Discount: Receive an additional 5% discount off weekly rates when you enroll in a total of 4 or more weeks. *(discount applies to subsequent weeks after participating in 3 weeks of camp, weeks do not have to be consecutive and applies to either half or full days).*

Sibling Discount: Receive an additional 5% discount on siblings *(applies to the lesser tuition rate).*

Early Bird Discount: Completed application and registration fee must be submitted and paid to receive the discounts. Additional weeks added after 5/15/25 will be invoiced at the standard weekly session rates.

Enrollment Disclaimer: All weeks are subject to change based on the total number of enrollments for any given week. Each week requires a minimum enrollment of 5 students. If any week is less than 5 students, we will contact those families to look at enrolling in other potential weeks.

ENROLLMENT AGREEMENT

I/We wish to enroll my/our child at NW Children's School Summer Camp program. By submitting this application in its entirety along with the one-time, non-refundable **Registration Fee**, I/We understand it guarantees our students' enrollment in the 2025 Summer Camp program **only**. I/We understand that selected weekly sessions are subject to change, but that Northwest Children's School will do their best to accommodate the selected summer camp sessions based on student enrollments, staffing, and any other factors which determine class availability. I/We have filled out the application in its entirety, pages 1 through 6, and believe it to be accurate and true.

Signature of Parent or Legal Guardian

Date

Additional Information

1. Students must be toilet-trained without requiring help with cleaning & dressing themselves. We do help with reminders and can make some minor exceptions, contact us for our guidelines.
2. Please add nwchildrenschool@gmail.com to your safe sender list to ensure emails are not sent to junk/spam email folders.
3. We actively use ClassDojo; a secure, restricted access, app used for parent-teacher communications - accessible only by registered parents & our staff. Teachers post classroom updates weekly which may contain images of students and our classrooms. Invitations for access will be provided upon registering for camp.
4. Students will be required to wear sunscreen on sunny days. Personally provided sunscreens can be left for the duration of camp.
5. Monthly tuition invoices are automated emails sent by QuickBooks Online/Intuit. Invoices may also be sent via text message to the primary contact listed on this application.
6. The default payment method on invoices is electronic check ACH from a bank account. This payment method charges a 1% processing fee charged separately by the processing merchant. Alternate payment methods include credit/debit card, Venmo, Apple Pay, PayPal with a 3% processing fee added to the monthly tuition. Payment processing fees are subject to change at any time, at the processing merchant's discretion. All fees are the responsibility of the paying party.