



Early Foundations Inc.
 112 Byerly Drive
 Jeannette, Pa 15644
 724-744-0114
<https://www.earlyfoundationsacademy.net/>
Earlyfoundationsacademy@gmail.com
Efa.afterschool@gmail.com

Preschool Registration/Agreement - 2026 Summer Camp 6/1 - 8/14

Your child **must** be potty trained and **independent** in the restroom.

****Services provided: Activities, care, snacks and materials**

Transitional care week prior to and following summer camp program is at the yearly child care rate and sign up for attendance is separate from summer camp.

Mon Tues Wed Thurs Fri (Please select days needed)

_____ 5 days/week - Tuition \$195 per week

_____ 4 days/week - Tuition \$165 per week

_____ 3 days/week - Tuition \$130 per week

_____ 2 days/week - Tuition \$88 per week

Fee amount \$_____ per week

Each child will receive **one week vacation** with no tuition due each Summer Camp (when absent M-F) Credits will **not** be issued for any absences, closed days, emergency closures or additional vacations. *Payment is preferred by the previous Friday, but absolutely on the Monday or first day of the week that your child will attend. Addl \$10 will be charged for late payments. Addl \$5 charged for each 5 minutes late after 6 pm. *

Child's name _____ male/female

Allergies _____

Age (at time of registration): _____ Birthdate: _____ / _____ / _____

Address: _____

Mother's name _____ phone: _____

Email: _____

Father's name: _____ phone: _____

Email: _____

Has your child ever attended any preschool/childcare prior? _____

How did you hear about our program? _____

Arrival time: _____ Departure time: _____

Date of Child's Admission (office use only): _____

Releases & Permissions:

- **Photo release** (please circle one and initial)

I DO/ DO NOT give Early Foundations, Inc. permission to use photographs of my child taken during class time, playground time, school functions and/or field trips. These photos will only be used internally and will be posted inside the classrooms and hallways for teacher education and historical record. I also understand that all photos will be available for review should I request to do so. _____

I DO/ DO NOT give permission for photographs of my child to be used for publicity purposes on the school website, brochures or other means of publicity. I understand that my child will not be identified by name when photos are used for publicity purposes. _____

- **Sunscreen Permission** (please initial)

If you would like your child to wear sunscreen outdoors, please provide a bottle of your preferred sunscreen SPF 15 or higher. All bottles must be labeled with your child's name. _____

- **Please list any and all persons designated by parents/guardians to whom the child may be released**

All parents and persons listed on the emergency contact form and additional persons listed below

55Pa code chapters 3270.123 & 181(c); 3280.123 & 181(c); 3290.123 & 181(c)

I, the parent/guardian (ALL boxes must be checked to enroll)

- Verify that all of the above information is true and accurate
- Verify that I reviewed written program information prior to enrolling located at <https://www.earlyfoundationsacademy.net/>
- Agree to update the emergency contact and registration fee agreement whenever changes occur or every 6 months at a minimum.
- Will provide child's physical upon enrolling and annually thereafter.

_____ Parent/guardian signature	_____ date	_____ cash/check #
_____ Early Foundations administrator	_____ date	

The annual family registration fee of \$50 (if not previously paid) and the summer camp activity fee of \$20 must accompany this registration form. This fee is non-refundable. Incomplete registrations will not be processed. Please make checks payable to Early Foundations Inc. Acceptance is not official until you have received an acceptance notice.

6 month REVIEW: _____
Signature of parent/guardian date



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"Where you create a solid foundation to build endless stories of success!"