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SUMMER CAMP ENROLLMENT FORM

CHILD'S FULL NAME _____
FIRST MIDDLE LAST

ADDRESS _____ HOME PHONE NUMBER _____

CITY/ZIP _____ E-MAIL _____

DATE OF BIRTH: _____ Male ___ Female ___

CHILD'S SOCIAL SECURITY #: _____ SCHOOL GRADE NEXT YEAR _____

PLEASE LIST BELOW THE NAME OF THE PARENT(S) AND/OR GUARDIAN(S) WITH WHOM THE CHILD RESIDES.

MOTHER _____ FATHER _____
Check one: ___ Parent ___ Step parent ___ Guardian Check one: ___ Parent ___ Step parent ___ Guardian

If your child is residing with only one parent, and the other parent is living, list the name of the non-custodial parent.

Name

Address

Best contact telephone number

Is there a no contact order in effect? ___ Yes ___ No
If yes, documentation must be attached.
Is the non-custodial parent authorized to pick up child? _____ Yes _____ No

Field Trips: Mountain Peak Private School has my permission to take my child on field trips away from school grounds: ___ Yes ___ No

INSECT REPELLENT PERMISSION

Name of Insect Repellent _____

Your child's care provider will assist with applying insect repellent before outdoor activities. Insect repellent will not be applied to any broken skin or if a skin reaction has been observed. Any skin reaction observed by staff will be reported promptly to the parent/guardian.

Special Instructions

- [] In the event that my child's insect repellent is not readily available; my child may use the insect repellent provided by the school _____ Off! Skintastic Family Unscented _____.
- [] I do not want my child to use any other insect repellent other than the one he/she brings.

SUNSCREEN PERMISSION

Name of Sunscreen and the SPF Number _____

Your child’s care provider will assist with applying sunscreen to bare surfaces including the face, tops of ears and bare shoulders, arms, legs and feet 15-30 minutes before outdoor activities. Sunscreen will not be applied to any broken skin or if a skin reaction has been observed. Any skin reaction observed by staff will be reported promptly to the parent/guardian. It is the parent’s responsibility to provide sunscreen with a minimum SPF of 15.

Special Instructions

In the event that my child’s sunscreen is not readily available, my child may use the sunscreen provided by the school
_____ No-Ad SPF 30 or 45 _____.

I do not want my child to use any other sunscreen than the one he or she brings.

I/We understand that my/our signature(s) on this agreement verifies that I/we will abide by the policies and procedures of the school and its administration as stated in the Mountain Peak Private School Handbook. My/Our signature(s) also verifies that I/We have shared all available information (special needs, outside testing, behavioral issues, etc.) on my child in an effort to ensure success. Failure to do so may result in having to withdraw my/our child.

Parents agree to indemnify, defend and hold the School (its agents, trustees, and employees) harmless from claims, losses, liabilities, damages, or expenses (including but not limited to attorney fees and costs of suit) which are caused by the negligent, reckless or willful and wanton misconduct of the parents’ child (the student). The parents release the School (its agents, trustees and employees) from any claim, losses, liabilities, damages, or expenses (including but not limited to attorney fees and costs of suit) the student and/or parents may suffer or incur as a result of any specific act of the School (its agents, trustees and employees) including any negligent act.

I/We understand the terms and conditions of this agreement regarding payment of the non-refundable deposit and camp fees.

My/Our signature(s) below also grants permission for Mountain Peak Private School to use photographs and/or videos of my child in displays, advertisements and promotions for the school. I/We understand that no monetary or other compensation will be received in exchange for this.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date