



# Rochester Childfirst Network

SERVING CHILDREN SINCE 1857

## Fun in the Sun in the South Wedge 2019 Enrollment Application

**Child's Name:** First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Highest Grade Completed (as of June, 28 2019): \_\_\_\_\_ School: \_\_\_\_\_ Male Female  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Mother's/Guardian's Name:** First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: Cell: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Home: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Work: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_  
Employer: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Father's/Guardian's Name:** First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: Cell: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Home: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Work: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_  
Employer: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Indicate which weeks your child will attend:**

- |                         |                               |
|-------------------------|-------------------------------|
| Week 1. ____ June 24-28 | Week 6. ____ July 29-August 2 |
| Week 2. ____ July 1-3** | Week 7. ____ August 5-9       |
| Week 3. ____ July 8-12  | Week 8. ____ August 12-16     |
| Week 4. ____ July 15-19 | Week 9. ____ August 19-23     |
| Week 5. ____ July 22-26 | Week 10 ____ August 26-30     |

**Payment & Tuition Rates:**

School Age Tuition Rate: \$220.00/week \*\*\$135 for week 2  
Preschool Tuition Rate: \$250.00/week \*\*\$150 for week 2

A non-refundable \$15 registration fee per attendee is due at time of enrollment. Tuition is due each Wednesday for the upcoming week. If your account is two weeks in arrears a \$10 fee will be charged. If your account is three weeks in arrears another \$10 will be charged and services will be terminated unless payment is made. Two weeks notice must be given for withdrawal or session changes. **\*Pay the full summer in advance and receive a \$25 discount\***

Indicate your payment method: ACH Credit Check Cash Do you anticipate receiving funding through DHS? Yes No

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

RCN Director Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**(OPTIONAL)**

We value diversity! Please check your child's race/ethnicity: Asian Bi-racial Black Caucasian Hispanic Native American  
How did you hear about RCN? \_\_\_\_\_