



SKATELAND
SUMMER CAMP 2025
REGISTRATION

800 BOOKMAN RD PONTIAC, SC 29045
(803)-736-0606/(803)-386-8094

PLEASE FILL OUT AND RETURN IN PERSON
OR BY EMAILING TO
skatelandchildcareprograms@yahoo.com

SUMMER CAMP REGISTRATION 2025

800 Bookman Road, Pontiac, SC 29045

(803) 736-0606 or (803) 386-8094

PLEASE PRINT

Start Date: _____ **End Date:** _____

CHILD'S NAME (Last, First, Middle) _____

NAME BY WHICH CHILD IS CALLED (Nickname or Middle Name) _____

ADDRESS _____

DATE OF BIRTH _____ AGE _____ SEX _____

MOTHER'S NAME _____ Phone # _____

PLACE OF EMPLOYMENT _____ Phone # _____

FATHER'S NAME _____ Phone # _____

PLACE OF EMPLOYMENT _____ Phone # _____

MOTHER'S E-MAIL ADDRESS _____

FATHER'S E-MAIL ADDRESS _____

NAME OF SCHOOL CHILD ATTENDS _____

DOES CHILD HAVE ANY KNOWN ALLERGIES? (Such as: dust, medications, plants, animals, food, etc.) If yes, what are they? _____

DOES CHILD HAVE ANY KNOWN HANDICAP/DISABILITY? _____

NAME OF CHILD'S DOCTOR _____ DOCTOR'S PHONE # _____

HOSPITAL PREFERENCE _____

NAME OF INSURANCE _____

ALTERNATE EMERGENCY CONTACT PERSON (If mother or father cannot be reached) _____

PHONE # FOR EMERGENCY CONTACT _____

PLEASE NOTE

* In the event that someone other than you will be picking up your child, PLEASE notify us.

* We at Skateland believe that wholesome, physical activity is an integral part of a child's development.

We are very proud of our safety record and the amount of diverse physical activity that our children are allowed to enjoy. However, when skating and/or playing, accidents can happen. Parents must assume risk for their child's activities at the Center. We cannot and do not carry insurance covering injury.

I, the undersigned, am in agreement with the above and hereby release Skateland and its employees from liability resulting in an accident and/or injury that may occur while my child is in their care.

Parent's Signature

SKATELAND USE ONLY: Registration fee

Payment Type: PROCARE or CLOVER

Received by: _____ Date _____

POLICIES/PARENT AGREEMENT

Please Print

Child's Name _____

1. Tuition is \$185 weekly for 3 or more days, and \$65 for the daily drop in rate. Tuition will be posted the Friday before the week of attendance and must be paid before drop off Monday morning or the child will not be allowed to attend.
2. Center hours are 6:30 a.m. until 6:30 p.m., Monday through Friday. After 6:30 p.m., a late fee of \$2 per minute, per child will be added. This fee is due and payable at the time the child is picked up or before the child may return to the Center.
3. Your child must be dropped off by departure time for field trip days. If there is no field trip, your child must be dropped off by 8:30 a.m. If your child is dropped off after 8:30, they will not be allowed to stay.
4. The Center operates Monday through Friday, except Friday July 4th.
5. Parents are expected to bring their child into the Center and see that the child is under supervision before the parent leaves the premises. Parents must enter the building when picking up their child. Please note that the Center does allow free and full access to parents during Center hours, as long as instructional activities and routines are not disrupted.
6. Parents are responsible for signing their child in/out daily.
7. In the event of an emergency, Skateland has my permission to administer first aid or obtain emergency medical treatment in the child's best interest.
8. Discipline and guidance at the Center are consistent and based on individual needs and development. The Center will promote self-discipline and self-behavior. Physical punishment is never permitted. Instead, a brief, supervised "time-out" is used.
9. The Center provides breakfast, hot lunch, and snacks. You may bring lunch from home if you know your child will not eat what is provided. A food menu will be sent out weekly.
10. Loose clothing articles, towels, etc., must be marked with the child's name. The Center is NOT responsible for lost/stolen articles.
11. Children are not to bring cell phones and toys to the Center. The Center is not responsible for any articles brought from home.
12. The Center will only administer dated, labeled, prescribed medication.
13. Should management determine for any reason, at its sole discretion, that a child should be unenrolled, the child will be unenrolled and this agreement terminated by Skateland. In the case of withdrawal of my child from the Center, I agree to give one week's notice.
14. FOR FULL-TIME SUMMER CAMPERS: I agree to pay the tuition rate by Monday at 6:30 am for the current week. The tuition rate is subject to change with one week's notice. If the amount due is not paid by Monday of the week of attendance, the parent must personally ask the Skateland Director if the child may attend on Monday.
15. FOR PART-TIME SUMMER CAMPERS: I agree to pay the tuition rate in advance.
16. The Center reserves the right to take legal action to recover any unpaid fees, including any costs associated with the collection of unpaid fees.
17. 13. My child has my permission to be transported from the Center on field trips.
18. 14. Copies of menus and activities are available upon request and are subject to change without notice at the discretion of the management.
19. 15. Skateland will be open to the public including other daycare Centers for what is called an "all day skate". Skateland Summer Camp may attend a portion of these skate sessions. If you do not want your child to participate in an "all day skate," then you must notify us in writing that your child may not participate.
20. 16. This parent agreement is subject to change in whole or in part by Skateland upon one week's notice.

Signature of Parent _____ Date _____

**NAMES OF PERSONS, IF ANY, OTHER THAN PARENT/GUARDIAN
AUTHORIZED TO PICK UP CHILD**

NAME _____

ADDRESS _____

PHONE # _____

NAME _____

ADDRESS _____

PHONE # _____

NAME _____

ADDRESS _____

PHONE # _____

Skateland Summer Camp 2025 Attendance Plan

Child's Name:

Date enrolled: _____

My child will attend Skateland

- Part time: Occasional days throughout the summer, I will notify Skateland of these days in advance.
- Full time OR consistently throughout the summer:

My child will attend Skateland during the weeks of

- May 27-30 (Week 1)
- June 2-6 (Week 2)
- June 9-13 (Week 3)
- June 16-20 (Week 4)
- June 23-27 (Week 5)
- June 30-July 3 (Week 6)
- July 7-11 (Week 7)
- July 14-18 (Week 8)
- July 21-25 (Week 9)
- July 28- August 1 (Week 10)
- August 4-5

1. By signing below, I understand that if these plans change, I will inform Skateland Fun Center prior to the week of.
2. By signing below, I understand my child will not be accepted past 8:30 am. If a child must be dropped off after 8:30 a medical or doctors excuse must be provided, with approval from Ms. Kayla.

Parent name: _____ Date: _____

Signature: _____