



Date: ____/____

Mozart & Einstein's Camp of Staten Island

Family Name:

2025 Summer Camp Registration Form

	Ch:14 I	£					
	Child in	formation					
Last Name	First Name	Gender	Date of Birth	Grade in Sept			
		M F	/ /				
		M F	/ /				
		M F	/ /				
		M F	/ /				
Please indicate any alle	rgies disabilities or m	edications be	ere (include name	۸۰			
riease indicate any ane	rgies, disabilities of in		ere (include name	· · · · · · · · · · · · · · · · · · ·			
	Family I	nformation					
Address:	•		ity:				
Home Phone:()	State:		Zi	p Code:			
	Enrollment	Informatio	on:				
	W	eeks					
□ WkI: June 30th – July 3th	n 🗆 Wk2: July 7th	n – I I th	□ Wk3: July 14 th – 18th				
□ Wk4: July 22nd – 25th	□ Wk5: July 28 ⁻	th – August 1st	t □ Wk6: August 4th – 8 th				
□ Wk7: August th – 5th	□ Wk8: August	18th – 23rd	□ Wk9: August 25th – August 29th				
		Days					
□ Monday	/ednesday	□ Thursday	□ Friday				
	□ Tuesday □ W	redifiesday	- Trial saay	/			
	,	led Hours	- mar saay				

□ AM □ PM Academics Only	7:30 AM — 9:00 AM 3:00PM — 4:00PM	□ PM (Includes Academics) □ PM Academics Only	3:00 PM — 6:00 PM 3:00PM — 5:00PM

Guardian Information

Full Name	Relationshi P	Cell Phone #	Email Address
	() -	
	() -	

Emergency Contacts & Authorized Pickups

Full Name	Relationship	Co	ntact #	Authorized to Pickup?
	()	-	Yes / No
	()	-	Yes / No
	()	-	Yes / No
	()	-	Yes / No
	()	-	Yes / No
	()	-	Yes / No

Tuition

This section is for informational purposes only.

Weeks	1	2	3	4	5	6	7	8	9
Price	\$425	\$850	\$1,275	\$1,700	\$2,125	\$2,550	\$2,975	\$3,400	\$3,825
Per Week	\$425/wk	\$425/ wk	\$425/wk						

10% Early Bird Discount if you enroll by April 1st, 2025

Siblings receive a 10% discount off base tuition (does not apply to extended hours)

Extended Hours: \$225/wk for AM & PM (\$35.00 Daily) (includes Eye Level Academics from 3-4pm) (7:30am-6:00pm)

\$200/wk for PM Care Plus Academics (Eye Level from 3-4 plus care until 6:00pm) \$125/wk for Eye Level Academics Only (includes Eye Level Academics from 3-4pm) \$275/wk for Eye Level Academics Only (includes Eye Level Academics from 3-5pm)

\$75/wk for AM only (\$25.00 Daily) (7:30am -9:00am)

Contractual Agreement

By signing this agreement, you agree to the following:

- All program cancellations must be in writing; telephone or verbal cancellations will not be honored.
- Programs may not be changed or switched.
- There is a \$30 fee for returned checks.
- There is a 3.95% convenience fee for credit card tuition payments
- Only one discount may be applied where applicable; discounts may not be combined
- Health form and contract must be submitted before camper may attend; forms can be obtained from the camp website.
- This camp is not a program of or otherwise sponsored by the NYC Department of Education.
- A deposit of I week is required to process all camp registrations. This deposit (and any additional payment toward tuition) is refundable prior to April 1st, 2025, minus a \$50 processing fee. After April 1st, the 1-week camp deposit is not refundable, but any additional payments made toward tuition remain refundable prior to June 1st, 2025. After June 1st, 2025, no refunds will be given for withdrawal from camp.
- Super Smart Kids Inc. reserves the right to suspend and/or expel any camper. Refunds, if any, are at the sole discretion of Super Smart Kids Inc.
- I agree to allow my child to participate in all programs and allow the use of any photographs or video for future publicity material unless otherwise specified.
- I authorize Super Smart Kids Inc.to make all necessary emergency decisions including medical treatment when I and the persons I have listed above cannot be contacted.

Office Use Only				
Full Camp Fee \$	Deposit \$			
Extended Hours Fee \$	Total Due \$			

Signature: ______ Date: _____