

Pearl City Foundation Winter 2021 Registration

Half Day- closing at 2:00pm on December 24 and December 31

Last day for registration: December 10
ENROLLMENT CAPACITY- 50 STUDENTS

Send registration and payment to:
Pearl City Foundation,
P.O. Box 114
Pearl City, HI 96782
Registrations are accepted via email if paying by credit card.
Email to staff.pcf@gmail.com

Participant's Last Name		First Name		Birthdate		Gender M / F	
Mailing Address				City		State/Zip	
Daytime Phone #		EMAIL: REQUIRED FOR CREDIT CARD PAYMENTS		Child resides with: Father _____ Mother _____ Both Parents/ Other: _____			
<input type="checkbox"/> New enrollment <input type="checkbox"/> Returning Student				Read and acknowledge Parent Information packet on www.pearlcityfoundation.org Initial here:			
Current Grade		School Name		Allergies/Medical Conditions/Other Special Concerns			
Physician		Physician Phone		Medical Ins. Carrier		Choice of Hospital	
Mother/Legal Guardian's Name				Cell Phone #		Work Phone #	
Father/Legal Guardian's Name				Cell Phone #		Work Phone #	
In addition to the parents/legal guardians, I authorize the following people to pick up my child and/or be contacted in an emergency if the parent/legal guardian cannot be contacted. Attach additional sheet if needed.							
Name/ Relation		Phone		Name/ Relation		Phone	
Name/ Relation		Phone		Name/ Relation		Phone	

Fall Enrollment Options		
	FULL SESSION ALL DAY PROGRAM: December 20-31, 2021, 6am-6pm Includes field trips and transportation fee	\$ 425 / \$432.50
	HALF DAY PROGRAM: 6am-2pm December 20-31, 2021, 2021 Includes field trip and transportation fee	\$ 375 / \$382.50
	OPTIONAL CATERED LUNCH 8 lunches @ \$5/each, no ala carte orders unless enrolling on select days NO CATERED LUNCH ON DEC 23 & DEC 31	\$ 40

WEEKLY/DAILY OPTIONS		
	Monday, Dec 20	\$ 45
	Tuesday, Dec 21	\$ 45
	Wednesday, Dec 22	\$ 45
	Thursday, Dec 23, field trip SING 2 SNACK PACK +7.50	\$55 / \$62.50
	Friday, Dec 24 6:00am-2pm	\$35
	Monday, Dec 27	\$ 45
	Tuesday, Dec 28	\$ 45
	Wednesday, Dec 29	\$ 45
	Thursday, Dec 30	\$ 45
	Friday, Dec 31 6:00am-2pm, field trip D&B	\$ 45
Total amount due		\$

PAYMENT OPTIONS:

CHECK or CASHIERS CHECK for full amount.

Return check fee: \$25

CREDIT CARD:

An invoice will be emailed to you and online payment must be made

Medical & Video-Photo Waiver/Release

In case of accident or need for medical attention, I hereby give permission to Pearl City Foundation, its employees, agents or assigns to have my child taken to the nearest emergency medical facility for medical care. I further agree to pay any and all such medical expenses, costs and other charges and to release, discharge and hold harmless Pearl City Foundation, its officers, employees, agents and assigns from and against any liability or any claims or demands arising from or connected with such medical care.

I hereby give my child permission to attend and participate in the activities conducted by PCF's program. These activities include aquatics, off-property excursions, bus transportation, and enrichment activities. I hereby defend, hold harmless, indemnify, release Pearl City Foundation and all its officers, employees, agents, and assigns from any and all claims or actions for property damage, personal injury and/or death arising from my child's participation in any Pearl City Foundation programs

I hereby authorize PCF to use to my child's name and video or photograph at any time and in any manner in connection with its advertising, publicity, and public relation programs. No further claims will be made by me.

Signature of Parent/Guardian _____ Date _____

within 7 days of invoice date to ensure enrollment. Email required.

Questions? Contact Naomi or Misa at 456-2073 or email staff.pcf@gmail.com

Office Use: Date Rcvd: _____ Input _____ Conf Ltr _____ Pymnt Type _____ Amt: _____ Ck/#/CC Inv # _____

