

Bee Bop Clubhouse Caregiver & Me Registration Form

Class Day/Time: _____

Parent Information:

Parent First and Last Name _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email address: _____

Child Information:

1. Child's First and Last Name _____ M or F _____

Nickname: _____ Date of Birth: _____ Age: _____

2. Child's First and Last Name _____ M or F _____

Nickname: _____ Date of Birth: _____ Age: _____

All classes are on a first come, **first serve basis and are not guaranteed** without payment.

Please make checks payable to Bee Bop Clubhouse and mail the completed registration form and check to 401 Front St., Vestal.

POLICIES:

Refunds:

Once a registration form and payment have been turned in to Bee Bop Clubhouse, there will be no monetary refunds. If a class is missed, you are welcomed and encouraged to make up that class by attending another class that is offered within that session. If a class is not made up within that same session it will no longer be able to be made up.

Inclement Weather (ie. Snow Days, etc.):

Bee Bop Clubhouse will do its very best to make up any classes that are canceled due to inclement weather, but this is not guaranteed. We will follow the Vestal Central School District closing and school delays.

Siblings: There is a \$10.00 charge for any non-registered sibling that is 1 year or older that attends a class.

Cancellations: Any cancellations on the part of Bee Bop Clubhouse (excludes inclement weather) will be made up.

Responsibilities:

I have read the Bee Bop Clubhouse information and I am aware of the class policies. I understand that Bee Bop Clubhouse is a You and Me style class and that it is necessary for me or other caregiver to attend and supervise my child/children/. In doing so, I understand that I am responsible for the safety of my child/children while at Bee Bop Clubhouse.

Parent Signature: _____ Date: _____