## Libbylicious

191 Godwin Ave. Suite 2 Wyckoff, NJ 07481 WWW.Libbylicious.COM 201 - 847 - 2375

## **Summer Sewing Schedule 2025**

Weekly Camp is Monday through Friday Ages: 5 – 16 (No Sewing Experience Required)

**Registration Fee:** (Not a deposit, reserves your child's spot in camp for

**\$50 Per Person** as many weeks as they would like to attend)

**Price Per Week**: Single Session \$250.00 – 1 Hour and 30 Minutes

Per Person Double Session \$510.00 – 3 Hours and 15 Minutes

Session Times: Session 1) Drop Off: 12:00pm – Pick Up: 1:30pm

Session 2) Drop Off: 1:45pm – Pick Up: 3:15pm

Week One	Mon July 7 <sup>th</sup>	Fri July 11 <sup>th</sup>
Week Two	Mon July 14 <sup>th</sup>	Fri July 18 <sup>th</sup>
Week Three	Mon July 21st	Fri July 25 <sup>th</sup>
Week Four	Mon July 28 <sup>th</sup>	Fri Aug 1 <sup>st</sup>
Week Five	Mon Aug 4 <sup>th</sup>	Fri Aug 8 <sup>th</sup>
Week Six	Mon Aug 11 <sup>th</sup>	Fri Aug 15 <sup>th</sup>
Week Seven	Mon Aug 18 <sup>th</sup>	Fri Aug 22 <sup>nd</sup>
Week Eight	Mon Aug 25 <sup>th</sup>	Fri Aug 29 <sup>th</sup>

\*Fabric charges are additional, depending on items made\*

Fabric charges are due the last weekday your child attends camp!

If you have a fabric budget specify that on the Information Form!

#### **HOW TO SIGN UP FOR SUMMER SEWING SESSIONS:**

- **Step 1:** Choose the week(s) & time(s) your child/children would like to attend Sewing Camp.
- **Step 2:** Contact Miss Libby via Text or Email, to Confirm availability for your requested camp week(s) and time(s). Text: 201-739-0751 Email: Libby@Libbylicious.com
- Step 3: Print and Fill Out the Information Forms
- Step 4: Mail Total Payment and Filled Out Information Forms to: Libbylicious 191 Godwin Ave. Suite 2 Wyckoff NJ 07481 Do Not Drop Off Forms/Payment!

(Total Payment Includes: Registration Fee And Payment for All Camp Weeks.)

Checks payable to: Libbylicious LLC. Only Check or Cash Accepted No Credit Cards, Electronic Payments, etc..

### **IMPORTANT SAFETY REGULATIONS:**

- \* Pick up & Drop off Only, in Back Entrance!! Parents must wait outside.
- \* Temperatures are checked before entering the building. Parents/drivers are required to wait for temperature checks to be completed. Any participant with a temperature will be sent home immediately.
- \* It is optional to wear a face mask. (Miss Libby will be wearing a mask)
- \* Bring your own snack and drink!!
- \* No one can enter the facility prior to the start time of their session!! The 15 minutes between sessions is for preparation & cleaning!!

## **Information Forms**

First and Last Name:	<u> </u>		
Date of Birth:			
Address:			
Home Phone:		_Cell:	
Email:			
Emergency Contact Name/Phone:			
behavior/condition	we need to be aware o	pecial needs, disabilities, or of, to ensure optimal	r any
` ' '	our child/children will bates and Times per we	pe attending camp below.	
Registration Fee: \$50 P Camp Week(s): Single S		DR Double Session \$510 Per P	erson
Week:	Time:	Price:	
Registration Fee(s)	+ Week(s)	= Total Amount:	

# **Libbylicious Policies**

4	Notify Miss Libby via text or email, <u>At Least</u> Two Weeks in advance (prior to the date attending) to reschedule a camp week. Cancelations received less than two weeks in advance, will not be able to reschedule.
	Full Week Attendance Monday through Friday Required! No exceptions for missed days!
	Confirm dates before contacting Miss Libby! There are NO Refunds, Make-Ups, or Credits!
4	Please refrain from sending your children to sewing if they are ill! For example, if they have or have recently had a fever, are coughing, are sneezing, etc
	It is important to facilitate in maintaining a healthy and clean environment, as well as, reduce the spread of germs and illness.
4	Staff are Not Permitted to babysit Libbylicious customers.  Do Not solicit staff for babysitting/transportation services.
	Please sign below to acknowledge that you have Read, Understood, and Agree to all Libbylicious Safety Regulations and Policies.
	Date
	Signature of Parent/Guardian:
	Notes for Miss Libby (optional):

## Liability Waiver

I acknowledge the contagious nature of the Coronavirus/COVID-19.

I further acknowledge that Libbylicious LLC has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19 and other illnesses.

I also acknowledge that Libbylicious LLC can not guarantee that I will not become infected with the Covid-19 or other illnesses.

I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, staff, other clients, and their families.

I voluntarily seek services provided by Libbylicious LLC.

I acknowledge that I must comply with all set procedures to reduce the spread while attending sessions.

I attest that myself and my child/children:

\* Not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or loss of taste or smell.

I hereby release and agree to hold Libbylicious LLC harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or that may otherwise arise in connection with any services received from Libbylicious LLC. I understand that this release discharges Libbylicious LLC from any liability or claim that I, my heirs, or any personal representatives may have against the studio with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Libbylicious LLC. This liability waiver and release extends to the studio together with owners and employees.

Date:	
Signature of	
Parent/Guardian:	