

EYES OF THE WORLD NATURE IMMERSION

2024-2025 REGISTRATION FORM

Admission date: _____ Termination date: _____

Name of Class & days requested: _____

Child's Name: _____ Birthday: _____

Address: _____

Parent/Guardian #1 Name, & Phone number: _____

Address if different from above: _____

Parent/Guardian #2 Name, & Phone number: _____

Address if different from above: _____

Parent/Guardian #1 Email _____ Parent/Guardian #2 Email _____

Emergency Contacts (OTHER THAN PARENTS- We will always try parents' 1st)

Contact #1 Name/relationship to child/phone number:

Contact #2 Name/relationship to child/phone number:

Medical Information

Any allergies, disability, medical conditions, behavioral concerns? If yes, please explain:

Hospital Choice: _____

Family physician (Name & phone number) _____ (N/A)

Family dentist (Name & phone number) _____ (N/A)

Release Information:

Names/relationship of persons who are permitted to remove child from program:

**Please notify if someone new will be picking child up. Please have ID ready

Names/relationship of persons who are NOT allowed to remove child from program:

Completed by: _____ Date _____

Eyes of the World Nature Immersion 2024-25 Waivers

Child's name: _____ **Date:** _____

I hereby give my permission for my child to participate in the Eyes of the World Nature Immersion program at Vaughan Woods in South Berwick, ME. I understand this program involves active nature play that includes but is not limited to supervised tree climbing, rock climbing, building forts, bare feet(weather/location pending) & mud play.

Signature: _____ **Date:** _____

I hereby agree not to hold Eyes of the World Nature Immersion, Dawn Jenkins, volunteers, staff or location host/location liable in the case of injury or death as the result of my participation or that of my child's participation in this program. I give my permission for the Eyes of the World Nature Immersion staff to arrange for transportation of my child to a hospital and further give my permission for treatment for basic first aid in the event of an injury or emergency.

Signature: _____ **Date:** _____

I hereby grant Eyes of the World Nature Immersion and Dawn Jenkins the absolute right and permission to publish photos and/or videos of my child involved in nature play in pertinent publications. This includes posting to our social media pages. I agree that the photographs become the exclusive property of Dawn Jenkins.

Signature: _____ **Date:** _____

I hereby give my child permission to attend field trips as part of our place based curriculum. I understand this entails dropping & picking up child from location and including drink, snack & extra clothing as well as being properly dress for the day.

The locations include:

South Berwick Town Forest, Rocky Hill Preserve, Savage Wildlife Preserve, Brandmoore Farm, Goodwin Forest, Kenyon Hill & Orris Falls.

Signature: _____ **Date:** _____

I have read the Eyes of the World Nature Immersion handbook. I understand & agree to the terms and condition in this document including the enrollment/tuition agreement.

Signature: _____ **Date:** _____

Eyes of the World Nature Immersion

Maples Mornings 24-25 Financial Agreement

Child's Name _____ Parent's Name _____

Maples Mornings Days/Times: Tuesday, Wednesday, Thursday 9am-noon

***Put a check next to the days you are enrolling your child*

Tuesdays _____ Wednesdays _____ Thursdays _____

CLOSURES

Weather: EOTWNI fully embraces the philosophy of "There is no bad weather, just bad clothing". Weather conditions are monitored closely. Class will be held rain or shine. EOWTNI reserves the right to cancel to due health & safety conditions such as lightning, winds above 25 mph or heat advisory. You will receive a text message 2 hours before the start of the class if it will be closed for the day or early or a delayed opening. *On the rare occasion that EOTWNI needs to cancel a class, this will not be made up.

ENROLLMENT

- All enrollment documents must be signed before children can begin school. These documents include a registration form, waivers, Immunization forms & financial agreement.
- Deposit payments are preferred to be paid in full at the time of registration. This includes a two week tuition deposit and \$100 supply fee. These are not refundable. The two week tuition deposit will be applied to the last two weeks of school in June.
- Monthly payments are due on the 1st of every month. 1 day/week- \$50, 2 days/week \$100, 3 days/week- \$150
Weeks for payments per month
 September- 3 weeks
 October- 5 weeks
 November- 4 weeks (Thanksgiving payment will be made so I can pay staff for the day)
 December- 4 weeks
 (**Closed for 2 weeks for winter break, payment will made for the week of Christmas to pay staff)
 January- 4 weeks
 February- 4 weeks
 March- 4 weeks
 April - 5 weeks (adding Thurs 5/1 to the fifth week)
 May- 4 weeks
 June- 3 (Only 1 week payment is due at the time, Deposit pays for last 2 weeks....Last day 6/19)
- Payment plans are available upon request. Although full payments are preferred, I fully understand that is not always possible. I do not want this to deter your child's enrollment. I will work with you to come up with a plan that suits your family's financial needs!
- Families who choose to withdraw prior to the fulfillment of their enrollment, will not be refunded their tuition or supply fee.
- No refunds or make-up days offered
 If you are 10 or more mins late, a \$20 late fee will be expected at the time of pick up.
- School will be open during February and April vacation.
- You will be allowed one week vacation without tuition payment. You may choose this week any time during the year. Please let me know when making your tuition payment on the first.

TUITION- \$50/day Payments accepted through: Venmo @Dawn-Jenkins, Cash/Check accepted

I _____, agree to the terms set by Dawn Jenkins, Eyes of the World Nature Immersion.

Signature: _____ Date: _____

