

# Summer Program 2026 ~ Toddler Registration

**SUMMER PAYMENT Preference:**  -IN FULL  -MONTHLY  -charge TUITION EXPRESS

Student's Name: \_\_\_\_\_ Current Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

**All registration forms must be accompanied by a non-refundable \$70.00 registration fee**

➤ Please indicate the weeks your child will attend by checking the box - Circle the particular days needed for attendance - Total the bottom columns

		<b>TODDLER</b> Themes of the week	5 Full Days	5 1/2 Days	4 Full Days	4 1/2 Days	3 Full Days	3 1/2 Days
			\$260 week	\$195 week	\$225 week	\$180 week	\$195 week	\$155 week
Wk 1 **	May 26 -- 29	Beach Days	**NO School or ED on Monday, 05/25/2026 MARK correct column ▶▶		<input type="checkbox"/> T W TH F			
Wk 2	June 1 -- 5	The Great Outdoors	<input type="checkbox"/> M - F	<input type="checkbox"/> M - F	<input type="checkbox"/> M T W TH F			
Wk 3	June 8 -- 12	E-I-E-I-O	<input type="checkbox"/> M - F	<input type="checkbox"/> M - F	<input type="checkbox"/> M T W TH F			
Wk 4 **	June 15 -- 18	The Earth Beneath Our Feet	**NO School or ED on Friday, 06/19/2026 MARK correct column ▶▶		<input type="checkbox"/> M T W TH			
Wk 5	June 22 -- 26	Vroom, Vroom	<input type="checkbox"/> M - F	<input type="checkbox"/> M - F	<input type="checkbox"/> M T W TH F			
Wk 6 **	June 29, 30 July 1, 2	Dr. Suess	**NO School or ED on Friday, 07/03/2026 MARK correct column ▶▶		<input type="checkbox"/> M T W TH			
Wk 7	July 6 -- 10	Zoobiloo Zoo	<input type="checkbox"/> M - F	<input type="checkbox"/> M - F	<input type="checkbox"/> M T W TH F			
Wk 8	July 13 -- 17	In the Pond	<input type="checkbox"/> M - F	<input type="checkbox"/> M - F	<input type="checkbox"/> M T W TH F			
Wk 9	July 20 -- 24	Under the Big Top	<input type="checkbox"/> M - F	<input type="checkbox"/> M - F	<input type="checkbox"/> M T W TH F			
Wk 10	July 27 - 31	Bubbles & Balls	<input type="checkbox"/> M - F	<input type="checkbox"/> M - F	<input type="checkbox"/> M T W TH F			
<b>Please TOTAL each column AMOUNT &gt;&gt;</b>								

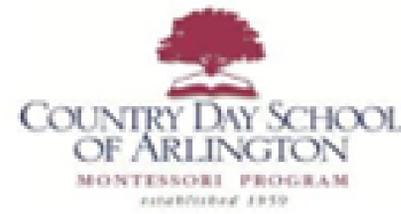
\*\*4-Day week: CDSA will be closed – No Extended Days available MON, 05/25/2026 (Memorial Day); FRI, 06/19/2026 (Juneteenth); FRI, 07/03/2026 (Independence Day)

Student's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

\*How would you like to pay for tuition?

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**Required Registration Documents:**

Returning Student:

- Summer Registration Schedule
- Summer Extended Day Program Agreement
- Registration Acknowledgement & Consent Form
- Parent Summer Handbook Acknowledgement - *sent after registration received*

New Student:

- Summer Registration Schedule
- CDSA Registration Form and Application for Admission
- Summer Extended Day Program Agreement
- Birth Certificate - copy
- Dismissal Instructions - *with drivers license numbers*
- Medical Consent & Information - *with physician signature & date*
- Immunization Records - *please keep the Front Office updated*
- Registration Acknowledgement & Consent Form
- Parent Summer Handbook Acknowledgement - *sent after registration received*
- Infant Care Plan - *Infant class only*

**Summer 2026 - fees remain the same as 2025**

**Summer Program Schedule Options**

**Full Days:** 8:15AM to 3:30PM

**1/2 Days:** 8:15AM to 12:30PM  
*(1/2 Day: Infant & Toddlers 8:15 - 12:00)*

**Extended Day Schedule Options**

**Offered 7:00-8:00AM and 3:30-6:00PM**

Drop-in Rate **\$0.10/minute** for 7-8AM and 3:30-6PM

ED Monthly Plan 7-8AM **\$90**

ED Monthly Plan 3:30-4:30PM **\$90**

ED Monthly Plan 3:30-6:00PM **\$175**

*Monthly plan available during June & July.*

**We anticipate Summer 2026 to be at maximum capacity, so if you plan to be with us, you will want to register as soon as possible. Registration is on a first come, first serve basis.**

**\*Please Note\***

All summer registrants are encouraged to utilize the convenience of automatic tuition payments via Tuition Express.

**For Office Use Only**

Revised: 01/02/2026

DATE RECEIVED: \_\_\_\_/\_\_\_\_/\_\_\_\_

-PROCARE: \_\_\_\_\_  B. O. COPIED

PAYMENT Made: -IN FULL -MONTHLY

AMOUNT \$ \_\_\_\_\_

CASH RECEIPT # \_\_\_\_\_

CHECK # \_\_\_\_\_

Classroom: -INF -T1 -T2 -P1 -P2

- TE / PROCARE