



# Summer 2020 Registration Form

**Husky House  
Children's Center**

Child's Full Name \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_

Grade for 2020-2021 school year \_\_\_\_\_

Guardian Full Name \_\_\_\_\_ Guardian Phone Number \_\_\_\_\_

Email Contact \_\_\_\_\_

Address \_\_\_\_\_

By registering your child, you are confirming that you fall under the \*qualifications from the Community Care Licensing (CCLD) and that for the safety of your child and the other children in care, your child will not be participating in outside gatherings of people beyond their household members.

Summer Care is Monday through Friday, from 9am to 3pm and billed at \$500 per week, to be charged semi-monthly.

June 1-5, June 8-12 & June 15-19  \$1500

June 22-26 & June 29 – July 3  \$1000

July 6-10 & July 13-17  \$1000

July 20-24 & July 27-31  \$1000

Total for Summer Care \$ \_\_\_\_\_

Priority is given to "essential workers" and based on length of care requested and the order in which received.

\*Husky House is following the guidance from governing bodies such as the CDC, state licensing, and the Contra Costa County Health Services. According to CCLD, Husky House may "continue to provide quality care for the children of families working on the frontlines against the coronavirus (COVID-19) pandemic. Essential workers include health care workers, emergency personnel, and first responders battling against this health crisis and those providing the vital services that we depend on daily, such as utilities. They also include employees from a wide range of businesses, such as grocery stores, gas stations, and hardware stores." Care offered under these circumstances will necessarily require us to continuously evaluate our plans & procedures for safety.

By signing below, you confirm that you will follow the health procedures outlined by Husky House, that you qualify for childcare services according to the CCC Health Services and CCLD. Your signature confirms that you understand this form is not a contract for care and acknowledge that due to health or safety regulations or guidelines, Husky House may need to modify or cancel care if new information is made known.

Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

OFFICE USE: Date Rcvd \_\_\_\_\_ Roster \_\_\_\_\_ Inv./Amt. \_\_\_\_\_ Paid \_\_\_\_\_ Lic. Forms on File \_\_\_\_\_ Tallied \_\_\_\_\_