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BLUE CRÈCHE

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## 2025 Forest School Registration Packet

### 1. Child Information

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

Preferred Name/Nickname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age at Camp: \_\_\_\_\_ Gender (optional): \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Secondary: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

### 2. Emergency Contact Form

#### *Emergency Contact #1*

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

#### *Emergency Contact #2*

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

#### Authorized Pick-Ups:

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_



### 3. Health & Allergy Information

Does your child have any allergies? ☐ No ☐ Yes (specify):

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Does your child require an EpiPen? ☐ No ☐ Yes

Does your child have any chronic medical conditions, injuries, or physical limitations? ☐ No  
☐ Yes (explain):

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Medications to be administered during program hours: ☐ None ☐ Yes (list medication, dosage, and times)

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Primary Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Provider (optional): \_\_\_\_\_

### 4. Sunscreen & Insect Repellent Permission

☐ I give permission for staff to assist my child with applying their own sunscreen and/or insect repellent.

☐ I give permission for staff to assist my child with sunscreen and/or insect repellent reapplication provided by The Little Blue Crèche.

☐ I do not give permission.

### 5. Activity Participation & Special Permissions

☐ I give permission for my child to participate in water play, hikes, and nature-based activities.

☐ I understand that kayaking, bike riding, and boat rides require separate waivers.



### 6. Photo & Media Release

☐ I give permission for The Little Blue Crèche to take photos/videos of my child for newsletters and a shared memory album. We do not share photos of children on social media.

☐ I do not give permission.

### 7. Tuition & Refund Policy Acknowledgement

I have read and understand the tuition payment schedule and refund policy.

### 8. Parent Handbook

I acknowledge that I have reviewed the summer camp handbook.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_