



EARLY LEARNING 2023



CHILD'S NAME: _____ ADDRESS: _____

GRADE IN SEPT: _____ DOB _____ AGE _____ GENDER _____

E-MAIL ADDRESS: (PLEASE PRINT CLEARLY) _____

GUARDIAN'S NAME: _____ GUARDIAN'S PHONE/CELL: _____

GUARDIAN'S NAME: _____ GUARDIAN'S PHONE/CELL: _____

EMERGENCY CONTACT NAME & PHONE # (MUST BE LOCAL): _____

EARLY BIRD REGISTRATION: April 4th through April 28, 2023, REGULAR REGISTRATION: Begins May 1, 2023, Additional weeks must be paid three (3) days in advance, keeping in mind that all camps are limited in the number of participants and subject to closure. The full fee must be paid at the time of registration. Payment may be made with a check payable to the Village of Hastings or credit cards accepted. The Recreation Department believes that every resident should have the opportunity to benefit from our programs. Financial assistance is available to qualifying individuals for more information please contact the Superintendent Aaron Podhurst

Children Entering Kindergarten

9am -1pm

EARLY BIRD

\$575 FULL SEASON

\$200 WEEKLY

REGULAR SEASON STARTS MAY 1, 2023

\$625 FULL SEASON

\$225 WEEKLY



- ☐ 1st Week: June 26,27,28,29,30
- ☐ 2nd Week: July 3,5,6,7
- ☐ 3rd Week: July 10,11,12,13,14
- ☐ 4th Week: July 17, 18, 19, 20, 21
- ☐ 5th Week: July 24, 25, 26, 27, 28
- ☐ 6thWeek: July /Aug .31,1,2,3,4



****NO REGISTRATION WILL BE ACCEPTED WITHOUT**

IMMUNIZATION RECORDS**

REQUIRED BY THE NEW YORK STATE HEALTH DEPARTMENT.

ALL SHOTS MUST BE UP TO DATE. CHILDREN WILL NOT BE ADMITTED TO CAMP UNLESS MEDICAL INFORMATION IS COMPLETE A HARD COPY OF ALL IMMUNIZATIONS SIGNED BY A PHYSICIAN MUST BE PROVIDED.

In consideration of you accepting this registration form, I the undersigned for myself, my executors, administrators And assignees, do hereby discharge Hastings Recreation Department, and any sponsors, organizers, and their representatives and successors from all claims of damages, demands, action, and causes of actions whatsoever, in any manner arising or growing out of my participation in said program. I further attest that I am physically qualified to participate in this program.

PARENT OR GUARDIAN SIGNATURE: _____

FOR OFFICE USE ONLY CK#/CC _____ CK AMT: _____ DATE: _____ INITIALS: _____ TOTAL FEES: _____



NON-RESIDENTS EARLY LEARNING 2023



CHILD'S NAME: _____ ADDRESS: _____

GRADE IN SEPT: _____ DOB _____ AGE _____ GENDER _____

E-MAIL ADDRESS: (PLEASE PRINT CLEARLY) _____

GUARDIAN'S NAME: _____ GUARDIAN'S PHONE/CELL: _____

GUARDIAN'S NAME: _____ GUARDIAN'S PHONE/CELL: _____

EMERGENCY CONTACT NAME & PHONE # (MUST BE LOCAL): _____

REGISTRATION: Begins April 3, 2023, Additional weeks must be paid three (3) days in advance, keeping in mind that all camps are limited in the number of participants and subject to closure. The full fee must be paid at the time of registration. Payment may be made with a check payable to the Village of Hastings or credit cards accepted. The Recreation Department believes that every resident should have the opportunity to benefit from our program

Children Entering Kindergarten

9 am -1 pm

FULL SEASON \$675

WEEKLY \$275



- ☐ 1st Week: June 26, 27, 28, 29, 30
- ☐ 2nd Week: July 3, 5, 6, 7
- ☐ 3rd Week: July 10, 11, 12, 13, 14
- ☐ 4th Week: July 17, 18, 19, 20, 21
- ☐ 5th Week: July 24, 25, 26, 27, 28
- ☐ 6th Week: Aug. 31, 1, 2, 3, 4



IMPORTANT

***NO REGISTRATION WILL BE ACCEPTED WITHOUT
IMMUNIZATION RECORDS****

IMPORTANT

REQUIRED BY THE NEW YORK STATE HEALTH DEPARTMENT.

**ALL SHOTS MUST BE UP TO DATE. CHILDREN WILL NOT BE ADMITTED TO CAMP
UNLESS MEDICAL INFORMATION IS COMPLETE A HARD COPY OF ALL
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PARENT OR GUARDIAN SIGNATURE: _____

FOR OFFICE USE ONLY CK#/CC _____ CK AMT: _____ DATE: _____ INITIAS: _____ TOTAL FEES: _____