



Summer School Program

July 3rd, 2017 – August 18th, 2017

107-06 71st Road, 2nd Floor, Forest Hills, NY 11375

Office: **(718) 575 8877** Email: info@ISTEINny.com Web: www.ISTEINny.com

ENROLLMENT AGREEMENT

NON-NEGOTIABLE TERMS AND CONDITIONS OF ENROLLMENT

UNDERSTANDING

I hereby certify that I am the parent or legal guardian of the listed student below, a minor, to participate in ISTEIN summer school program, ISTEIN Global Group Inc. and all its programs and activities. I grant ISTEIN the right to take and use photos and videos of the student listed below for promotional purposes. I hereby agree to reimburse ISTEIN for any property damage caused by the student listed below. I understand that the listed student below will not be allowed to participate in summer school and any other sponsored activities unless I provide a medical form completed by a licensed medical professional. I understand that my child's records (contacts, phone numbers, emails, and authorized pick-up) are my responsibility to keep current and accurate. I will update my child's records through the site director of ISTEIN whenever there is a change.

TUITION PAYMENTS, DUE DATE, LATE PAYMENTS & HOURS OF OPERATION

I understand that I am responsible for making **one time payments in full** and that **payments are due on June 24th, 2017**. If the full payment is not received after the due date, I understand that my child may be removed from the program. Children with outstanding balances will not be able to attend ISTEIN. I understand that **no refunds after July 3rd, 2017**. I understand that **Hours of Operation are 8:00 am to 6:00 pm. A \$4 Late Fee for every 10 minutes** (6:01pm - 6:10pm = \$4 / 6:11pm - 6:20pm = \$8 / 6:21pm – 6:30pm = \$12) will be due that day, if I am taking my child after 6:00 pm. **Extended time will be no later than 6:30 pm.**

HOW TO MAKE PAYMENTS

Program payments should be made by cash or check. Payments by check should be made to [ISTEIN GLOBAL GROUP INC.](#) I understand that full payments (one-time payment) are **due on June 24th, 2017**

HOLIDAY(S) SCHOOL CLOSING

I understand that there are some public holidays that ISTEIN will not be open. ISTEIN will NOT be in session on the following day(s): **July 4th, 2017**. I understand that the ISTEIN program will not meet due to inclement weather.

ABSENCES DURING PROGRAM

I understand that in the event of any absences during program hours, I will be responsible for fees for time reserved, not for actual time spent at the program. This would include any vacation time.

AUTHORIZE PICK UP

I understand that my child will NOT be released to any unauthorized person. I must sign my child out daily.

PERMISSIONS

I hereby give my child permission to participate in all activities of the program and field trips. I give my child permission to leave the program site for trips in a school activity vehicle or chartered transportation, or family car to off-site locations and enrichment programs. I understand that I will be notified before

each activity. I give my child permission to walk to points of interest in close proximity to the program site under ISTEIN supervision. I give permission to have my child appear in any media coverage or brochure approved. I give my child permission to watch PG movies.

MEDICAL AUTHORIZATION

I authorize the ISTEIN Site Director or designee to administer medication when necessary. I understand that I will have to sign a medication authorization form before any medication can be administered. ISTEIN staff will not administer shots (other than an EPI pen) or suppositories.

STAFFING

I understand that ISTEIN is not staffed to serve children who need one on one direct care. All children who attend ISTEIN must be able to use the toilet without assistance.

ISTEIN BEHAVIOR POLICY

I understand that my child will have to abide by the ISTEIN policies and procedures to ensure that each participant is safe and plays fair. My child will be taken away from activities when he/she cannot behave in a safe and expected manner. I will be informed of unacceptable behavior and asked to sign a discipline form. I understand that fighting of any kind will not be tolerated and will result in an automatic suspension. If behavior continues to be a problem, the Site Director will have the discretion to suspend my child from the program. If behavior does not improve, as a last resort, my child will be removed from the program. ISTEIN does not use corporal punishment.

EMERGENCY POLICY

In the case of an emergency if any of the listed contacts and emergency contacts cannot be reached, the director or acting person in charge of ISTEIN as well as the medical staff at New York Hospital Queens has my permission to make decisions regarding the emergency care or treatment for the student listed below. I hereby waive and release ISTEIN, and/or its designees from any and all liability and costs associated with any accidents and emergency care. I further understand that I or my medical insurance carrier will be responsible for any medical expenses arising from said emergency or treatment.

TUITION, FEE, AND PAYMENT POLICY

- I understand the rates apply to basic summer school program only unless otherwise specified.
- I understand if the student listed below is dismissed from ISTEIN summer school program that all tuition and fees assessed are **non-refundable** and **non-transferable**, and it can **NOT** be used as credit for other applicant(s) or upcoming terms due to any and all public holidays, public school breaks, and any natural disasters or/and force majeure.
- I understand the discount is **only valid to 2nd or 3rd** student from same family with enrollment of **entire 6 to 7-week full day** summer school program from **July 3rd, 2017 thru August 18th, 2017**, and the payment must be paid in full prior to the starting of the summer program, and that **payments are due on June 24th, 2017**.
- I understand **NO** group discounts will be given to students from outside of a family.
- I understand **NO** refunds will be given for any absence. All tuition and fees assessed are also **non-transferable** and it can **NOT** be used as credit for other applicant(s) or upcoming terms due to any absence.
- I understand the programs offered / tuition is subject to change every year.
- I understand and agree to make cash payment in the sum of **\$30** for administration fee if any check written to **ISTEIN Global Group Inc.** bounces.

By signing this form, I understand and agree to the policies set forth upon this document.

Student: **Print Name**

Parent / Legal Guardian: **Print Name**

Parent / Legal Guardian: **Signature**

/ /
Date