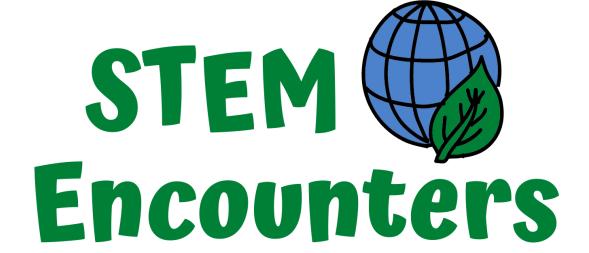
After School Pickup + Summer Camp



Afterschool Pickup

Summer Camp

Year-Round

Single Day Pickup

Virtual Learning Assistance

Day Camps



1912 East Firetower Road

www.stemencountersNC.com

(252) 751-3180

STEM SERVICES (CONTRACT 2020-	21				TEACHER	'S INITIALS:
PARENT FULL NAME				STREET			
PAREINI FULL IVAIVIL	/			SIREEI		NC	
DRIVER'S LICENSE NUM	MBERS			CITY		STATE	ZIP
STUDENT 1		DATE OF BIRTH		SCHOOL		GRADE	DISMISSAL TIME
STUDENT 2		DATE OF BIRTH		SCHOOL		GRADE	DISMISSAL TIME
STUDENT 3		DATE OF BIRTH		SCHOOL		GRADE	DISMISSAL TIME
Afterschool Pickup Year Round (Afters Afterschool Part-tir	school Pickup + Summe me (1-3 days). M T	\$50/househ \$80.00/wee r)\$85.00/wee W Th F \$70.00/wee able)\$30.00/pick	ek ek ek		o(no contract)		\$45.00/day \$195.00/weel
Hybrid Learning (pi	ickup and day camp)	\$102.50/we \$125/week	eek	Noon Pickup (Lu			\$105.00/week
START PICKING UP O	ON: / ,	/ 20	or	I'm unsure of th	e date, but pick up o	on the first d	ay of school, please.
NAME ON CARD X SIGN HERE - I Agree To		the event of closure of	NU	MBER ON CARD	3-DIGIT CODE		ILLING ZIP CODE
Please run my card	d every week		-				
days (and next sumr then a paid four-wee	mer, if selecting Afte ek written notice is r ate this contract for	ng your child (or child rschool Pickup+Summ equired. Please see F any reason without r	ner option) OUR-WEE	. If you wish to NOTICE below	withdraw prior to for details. STEN	to the end A Encounte	of this contract, ers, Inc. reserves
A \$5.00 Late Fee is a be used to balance a	dded if payment is la	weekly rate every we ate - please include it i of a missed payment Il not be prorated or r	if you pay I or to mak	ate. A valid cre	dit/debit card is r	equired to	register and will
count ahead four we	your intended last one seks from the day with	r child for any reason lay, submitted to the thdrawal is given to fir for paying tuition unti	STEM Enc	ounters directo of your child's	r, not to a teach last day, and that	er. The ST day will be	EM director will the the last day for
X SIGN HERE - I Agree To	All The Torms Stated	Ahoyo	X	to.	Discort	or Signature	/Data
	All the Terms Stated	-NO46	Da	ıc	Directi	or signature	, Date
WHEN RECEIVING A REGISTRATION FORM	BOX CHECKED CREDIT SIGNED	911 SIGNED WAIVER SIGNED	REGFEE P		\$		
FROM CLIENT	TERMS SIGNED	TEACHER INITIAL	<u> </u>		\$		
RUN CARD DETAILS	REG FEE	MONTHLY	AMOUNT				

parent name parent name email address mobile p	phone @ phone phone phone phone phone phone phone phone phone number group number f an emergency. I hereby give my consent to the event of an emergency at which time director's signature t is engaging in physical exercise, and the use to your child. The student is voluntaristudent, which may result. Buyer and student for injury to the student, which may result is a release of all liability and damage of the students or guests are sufficiently physical exical exercise program. The studio does not see the phone p
nealth care provider (family doctor) Policy numbers of the event any emergency Release: I hereby give my consent for STEM to call 911 in the event any emergency facility and physician to administer necessary treatment to my child cannot be reached. I give my consent to transport by ambulance if situation warrants. X I have read and understand (sign here) Waiver & Release: You, buyer and student, agree that you are aware that the stude of equipment, training and instruction, which can be dangerous and cause injue participating in these activities, and buyer and student assume all risk of injury to the hereby waive and release any claim or right to sue the center employees, or agent: Buyer and student have carefully read this waiver and release, and fully understand center for any injury. The center will make no evaluation or recommendation wheth fit for exercise. It is always advisable to consult a physician before undertaking a pla state the center and its personnel are not responsible for or liable for any such propert about the facility. STEM Encounters will make no evaluation or recommendation as to whether or not store exercise. It is always advisable to consult a physician before undertaking a phasume any responsibility for the loss, damage or theft, of any property belonging to center and its personnel are not responsible for or liable for any such property even the Creative Arts facility. X Linear exercise Arts facility.	phone phone phone phone phone phone number group number group number from the event of an emergency at which time director's signature tis engaging in physical exercise, and the use to your child. The student is voluntarifutedent, which may result. Buyer and student for injury to the student, which may result is a release of all liability and damage of the students or guests are sufficiently physical exercise program. The studio does not student and the studio does not student and the studio does not student.
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Vaiver & Release: You, buyer and student, agree that you are aware that the stude of equipment, training and instruction, which can be dangerous and cause injuranticipating in these activities, and buyer and student assume all risk of injury to the ereby waive and release any claim or right to sue the center employees, or agent truyer and student have carefully read this waiver and release, and fully understand enter for any injury. The center will make no evaluation or recommendation wheth it for exercise. It is always advisable to consult a physician before undertaking a plassume any responsibility for the loss, damage or theft, of any property belonging to that the center and its personnel are not responsible for or liable for any such property bout the facility. TEM Encounters will make no evaluation or recommendation as to whether or not so exercise. It is always advisable to consult a physician before undertaking a physician any responsibility for the loss, damage or theft, of any property belonging to enter and its personnel are not responsible for or liable for any such property even the Creative Arts facility. X have read and understand (sign here)	t is engaging in physical exercise, and the use to your child. The student is voluntarional tudent, which may result. Buyer and stude for injury to the student, which may result is a release of all liability and damage of the students or guests are sufficiently physical exercise program. The studio does not be sufficiently physical exercise program.
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have read and understand (sign here) date	ical exercise program. The center does note student. Buyer and Student agree that the
Food Allergies Med	director's signature
	cal Issues
Allowed To Pick Up	
	Not Allowed To Pick