

Lynbrook Public Schools Summer Playground Program

PROGRAM DIRECTOR
Mr. Leonard J. Bruno
516-887-0240

Marion Street Site
Leonard J. Bruno
Supervisor

West End Site
Lisa Darress
Supervisor



Playground Sites
Marion Street Elementary School
West End Elementary School

Program Dates and Times
July 5th –August 11th
Monday–Friday 9 am-12 noon

REGISTRATION INFORMATION

Registration will take place this year by mail only. All registration and health forms will be available on the Lynbrook Public School Website and must be filled out by June 1, 2017 including a check or money order made payable to Lynbrook Public Schools and mailed to Lynbrook Summer Playground, c/o Lynbrook Public Schools, Administration Building, 111 Atlantic Avenue, Lynbrook, NY 11563. A separate registration and health form must be filled out for each child. One check/money order is acceptable per family.

Anyone registering late will be charged an additional fee. Wednesday, July 5th, will be the first day of the program and children will attend from 9 am to 12 noon. All late registration forms (which will include a late fee) must be mailed to LYNBROOK SUMMER PLAYGROUND, c/o Lynbrook Public Schools, Administration Building, 111 Atlantic Avenue, Lynbrook, NY 11563. Please make all checks/money orders payable to *Treasurer, Lynbrook Public Schools*.

LYNBROOK SUMMER PLAYGROUND REGISTRATION APPLICATION

FAMILY NAME _____

CHILD'S NAME First _____ Last _____

MALE _____ FEMALE _____ Grade in September 2017 _____ Home School _____

STREET ADDRESS _____

Village _____

HOME TELEPHONE # _____

EMERGENCY # _____

AGE _____ GRADE COMPLETED _____

SCHOOL ATTENDING _____

CHILD'S PHYSICIAN _____

REGISTRATION INFORMATION

Lynbrook Public School's Summer Playground Program is open to all **Lynbrook School District resident** children and all **Village of Lynbrook resident** children who will be entering kindergarten in September 2017 through 8th grade. Those children attending private or parochial school or another school district other than Lynbrook must mail a copy of their immunization record, as well as proof of residency with their registration.

The program will be conducted at Marion Street Elementary School and West End Elementary School and will begin Wednesday, July 5th, 2017 and run through Friday, August 11th, 2017. Recreational activities, arts and crafts and special events will be offered everyday from 9:00am to 12:00 noon. The cost for the daytime program for all **Lynbrook Public School residents** is \$210.00 per child with a maximum of \$420.00 per family. The cost for the daytime program for all **Lynbrook Village residents** is \$240.00 per child with a maximum of \$480.00 per family.

Late registration forms and fees **must** be mailed to LYNBROOK SUMMER PLAYGROUND, 111 Atlantic Avenue, Lynbrook, N.Y. 11563. The late registration cost for the daytime program for all **Lynbrook Public School residents** is \$240.00 per child with a maximum of \$480.00 per family. The late registration cost for the daytime program for all **Lynbrook Village residents** is \$270.00 per child with a maximum of \$540.00 per family.

Along with the registration application and fee, the attached health questionnaire must be completed by a parent or guardian of each child who intends to participate in the program. Please fill out separate forms for each child. In addition, if your child's immunization records are not on file at a school building within the District, you must submit a copy of the records with your registration. **YOUR CHILD WILL NOT BE ALLOWED TO ATTEND WITHOUT HIS/HER IMMUNITIES RECORD.** This is a requirement of the Nassau County Department of Health.

All late registration forms and fees will be mailed to (make check/money order payable to *Treasurer, Lynbrook Public Schools*) Lynbrook Summer Program c/o Lynbrook Public Schools, Administration Building, 111 Atlantic Avenue, Lynbrook, NY 11563. No registration will be accepted by the individual school or administration office. Keep in mind that the fee for the Summer Playground is NOT prorated. Children will be grouped according to the grade they will be entering in September.

ACTIVITIES

ALL ACTIVITIES WILL BEGIN ON Wednesday, JULY 5th, PROMPTLY AT 9:00 A.M.

A full sports program will be offered. Children will have the opportunity to play softball, kickball, soccer, etc. At least once per week, children will participate in arts and crafts and computers. Special events, such as a talent show, a carnival, and Field Day will take place every week. Each Friday, ices will be served, free of charge, to all children present. The summer will conclude with Awards Day.

TRIPS

Every group will have planned trips during the season. A new permission slip is required for each trip. If you do not want your child to go on the trip, please do not send him/her to the playground that morning. Please use your discretion in choosing to have your child/children participate. Parents are not allowed to pick-up children from off campus activities.

SUPERVISION

A certified teacher will supervise each group with the assistance of a high school or college student serving as a junior counselor. During the playground hours of 9:00 a.m. to 12:00 noon, a nurse will be available in each school to handle any emergencies. Several counselors at each school are trained in CPR and First Aid. All campers are expected to conform to camp rules and regulations which will be explained to all on opening day. Campers will be asked to sign a statement attesting to the fact that these rules and regulations were explained to them and that they are understood by the camper. Children will be released from their designated areas promptly at 12:00. Please pick up your child at that area. **No child will be released without a parent/guardian present unless a note from parent/guardian is submitted beforehand.**

**LYNBROOK PUBLIC SCHOOLS
SUMMER PLAYGROUND
HEALTH QUESTIONNAIRE**



STUDENTS' NAME _____ GRADE (Sept. 2017) _____

SCHOOL ATTENDED LAST YEAR _____ AGE _____

FATHER'S NAME _____ MOTHER'S NAME _____

BUSINESS NAME _____ BUSINESS NAME _____

DAYTIME PHONE # _____ DAYTIME PHONE # _____

CELL PHONE # _____ CELL PHONE # _____

STUDENT'S
PHYSICIAN

ADDRESS _____ PHONE # _____

**If parent is not available in case of illness or emergency,
please list *LOCAL* relative or neighbor to contact:**

NAME _____ NAME _____

ADDRESS _____ ADDRESS _____

PHONE # _____ PHONE # _____

CELL PHONE # _____ CELL PHONE # _____

HEALTH HISTORY

1. Has your child had a routine health exam in the last year?

Yes _____ No _____

Date of last exam _____ Physician _____

2. Has your child had any illness or injury in the last year? (If yes, please explain)

Yes _____ No _____

3. Does your child have any disabilities? (If yes, please explain)

Yes _____ No _____

4. Are there any limitations on activities? (If yes, please explain)

Yes _____ No _____

5. Does your child take any medication? (If yes, please explain)

Yes _____ No _____

6. Does your child have any of the physical conditions listed below? Please circle:

Allergies (specify) _____

Hay fever
Asthma
Wheezing
Eczema
Skin Rashes

Heart Problems
Convulsions
Dental Problems
Seizures
Shortness of Breath

Frequent Sore Throat
Diabetes
Corrective Lenses
Trouble Passing Urine
or Bowel Movement

Signature of Parent or Guardian

Date

*****Marino's Ices will be served on Fridays during summer camp. Please check if you do not want your child to have a Marino's Ice. I do not want my child to have a Marino's ice**

