



**COMMONPOINT**  
Community happens here

# Youth Holiday Program at Central Queens

67-09 108<sup>th</sup> Street, Forest Hills

## Pricing Information

\$80.00 In House Days  
\$100.00 Trip Days\*

☐ February 16th  
**In House Day @ CQ**  
**(Swim & Recreational Activities)**

8:00 a.m. - 6:00 p.m.



☐ February 17th  
**In House Day @ CQ**  
**(Swim & Recreational Activities)**

8:00 a.m. - 6:00 p.m.

☐ February 18th  
**Trip to the Movies:**  
**GOAT**

8:00 a.m. - 6:00 p.m.



☐ February 19th



8:00 a.m. - 6:00 p.m.

☐ February 20th  
**In House Day @ CQ**  
**(Swim & Recreational Activities)**

8:00 a.m. - 6:00 p.m.



If you have any questions please  
contact

Alexa Chiriboga at:  
(718) 268-5011 x 203 or  
YHP@commonpoint.org



**MUST pack a  
NUT-FREE lunch**

## Child's Information

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

Age: \_\_\_\_\_

Gender: \_\_\_\_\_

Grade: \_\_\_\_\_ School \_\_\_\_\_

D.O.B: \_\_\_\_\_

Allergies? \_\_\_\_\_

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

Age: \_\_\_\_\_

Gender: \_\_\_\_\_

Grade: \_\_\_\_\_ School \_\_\_\_\_

D.O.B: \_\_\_\_\_

Allergies? \_\_\_\_\_

**Does your child(ren) have IEP?** ☐ Yes ☐ No

## Guardians Information

Guardians Name: \_\_\_\_\_

Preferred Phone #1: \_\_\_\_\_

Phone #2: \_\_\_\_\_

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

**Join email List?** ☐ Yes

## Authorized Pickups

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLEASE READ THE ACCOMPANYING SHEET / REVERSE SIDE WITH OUR GENERAL INFORMATION AND  
POLICIES.

By completing this form you acknowledge and agree that you have read and understand the information  
attached to this registration form and agree to the terms the Commonpoint set forth.

PROUD PARTNER  
**UJA** Federation  
NEW YORK



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Thank you for enrolling with our Youth Holiday Program. To create an account in our system for each family, we need to gather information from the primary caregiver.

Please fill out the below information

## Primary Caregiver Information

Primary Caregiver Full Name: \_\_\_\_\_

Primary Caregiver Date of Birth :    /    /  
\_\_\_\_\_

Email Address : (This will be the email used to create your account)

\_\_\_\_\_  
(please print carefully)

## Payment Method

Please select your preferred method of Payment

- |                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/> Debit Card | <input type="checkbox"/> Credit Card ( <u>3% Surcharge each time card is used</u> ) |
| <input type="checkbox"/> Check      | <input type="checkbox"/> Payment Method Used for After-School                       |
| <input type="checkbox"/> Cash       | <input type="checkbox"/> ACH  |

### Authorization

By signing below, you authorize Commonpoint to create an account using the information provided and acknowledge the terms of payment associated with your selected payment method.

Credit/Debit Card Number

.....  
EXP DATE

Signature

\_\_\_\_\_  
DATE

## **1. Supervision and Responsibility:**

- For the safety of your child, Commonpoint can only assume responsibility when they are under the supervision of an authorized staff member.
- Special medical needs of enrolled children are the responsibility of parents/guardians; supervision is available only during program hours at designated locations.
- Parents/guardians are required to inform program staff of any child absences, late arrivals, early or late pick-ups, or special circumstances related to arrivals or departures.

## **2. Cancellation & Refund Policy:**

- **Cancel 48 hours before the program begins: Full refund, minus a \$10 processing fee.**
- **Cancel 24 hours before the program begins: 50% refund, minus a \$10 processing fee.**
- **Same-day cancellations are not eligible for a refund or credit.**
- **No refund will be granted if a child is asked to leave the program due to frequent misconduct or non-compliance with program regulations.**
- **No refund for missed days due to absence, illness, or early withdrawal.**

## **3. Participant Release and Waiver:**

- Participation in Commonpoint programs is voluntary, and guardians acknowledge awareness of program activities.
- Parents/guardians certify that their child is capable of participating in physical activities and recognize staff efforts to minimize injury risks.
- Parents/guardians waive, release, indemnify, and hold harmless Commonpoint, its sponsors, and agents from any claims arising out of child injuries, except to the extent covered by insurance.

## **4. Photography and Publicity:**

- Permission is granted for Commonpoint to photograph children for public and promotional purposes.

## **5. Personal Property and Emergency Authorization:**

- Commonpoint is not responsible for personal property brought by children (e.g., gaming systems, toys, cell phones). Parents/guardians are strongly advised not to bring such items.
- In case of emergency, parents authorize designated medical professionals to perform necessary procedures and administer treatment to their child during participation in Commonpoint programs.

By enrolling your child in our programs, you acknowledge and agree to the terms and conditions outlined above. These measures are in place to prioritize the safety and well-being of all participants.