

Enrollment Form

Summer Camp: 8/04-8/15/25



Please email to
 pksommerlager@gmail.com or send to:
 Manuela Sieber
 Attn: PhillyKinder
 145 South Pennock Ave
 Upper Darby, PA 19082

Location: Swarthmore Friends Meeting –

Quaker Church on Swarthmore College campus (12 Whittier Pl, Swarthmore, PA 19081), located on the shady campus of Swarthmore College with access to nature trail system.

Parent 1 (Main contact): _____

Phone: _____
E-Mail: _____
Parent 2: (Should this contact receive emails too? Yes No) _____

Phone: _____
E-Mail: _____
Address (for new families or if address has changed): _____

Does your child have any special needs which PhillyKinder should be aware of (allergies, sensitivities, illnesses etc.)?

 If yes, does your child use an EpiPen or inhaler? Yes No

Classes are held exclusively in German. It is important to us that our participants be able to enjoy their PhillyKinder experience. Is your child able to follow instructions in German?
Yes No Sometimes

First and last name	Birthdate (MM/YY)	Grade in 25/26	Camp: Mo-Fri, 9 - 3 pm	Fees
_____ Oldest child			2 consecutive weeks: Aug. 4 – 15, 2025	\$ 775
			1st week: Aug. 4 – 8, 2025 2nd week: Aug. 11 – 15, 2025	\$ 400 each
_____ Second child (\$20 rebate)			2 consecutive weeks: Aug. 4 – 15, 2025	\$ 735
			1st week: Aug. 4 – 8, 2025 2nd week: Aug. 11 – 15, 2025	\$ 380 each
_____ Third child (\$20 rebate)			2 consecutive weeks: Aug. 4 – 15, 2025	\$ 735
			1st week: Aug. 4 – 8, 2025 2nd week: Aug. 11 – 15, 2025	\$ 380 each
Total				
PayPal payment transaction fee, add 2.5%				
Donation (any amount is greatly appreciated, thank you!)				
Total payment				

Please make checks out to 'PhillyKinder', designate 'Sommerlager' in Memo Line and send to Manuela Sieber, Attn: PhillyKinder, 145 South Pennock Ave, Upper Darby, PA 19082. Please notify us by e-mail when mailing a letter and we will acknowledge receipt. If you pay via PayPal, please send your payment including the 2.5% transaction fee to 'phillykinder@gmail.com' and add 'Sommerlager' in the note section.
If you are experiencing financial hardship, please contact us at phillykinder@gmail.com.

Photo Permission

* I give permission for photos of my child to be taken and used for in-class projects and limited program promotion, such as the PhillyKinder website or Facebook page, the German Society of Pennsylvania's newsletter and similar publications, etc., as long as no names are mentioned.

YES NO

Address

Swarthmore Friends Meeting – Quaker Church
12 Whittier Pl
Swarthmore, PA 19081

Lunch Policy & Emergencies

* Attendees bring their own lunch bags. We provide a healthy snack. Please pack sufficient drinks and a water bottle for your child.

There is a water fountain with filtered drinking water on the premises.

* Most of our staff is trained and certified in First Aid and CPR. We follow the American Heart Association's guidelines in regard to 911 calls.

Pick-up Policy and Authorization

* Camp starts at 9:00AM, with drop off starting at 8:45AM, and ends at 3:00PM.

* Drop-off at the playground entrance. Parents/guardians/care givers etc. supervise their children until a teacher or adult teacher's aide has checked in the child.

* Pick-up and check-out from the 'tree stump circle' to the LEFT of the building entrance or - in case of rain - from the main entrance.

Pick-up Authorization

If someone other than the parent or guardian will be picking up your child from class, a written authorization must be provided by the parents/guardian.

The following people have permission to pick up my child from PhillyKinder summer camp:

Name / Relationship / Phone Number

I agree to the following Health and Safety procedures, please initial all:

_____ I agree to follow the PhillyKinder health and safety policies including a possible mask policy. Those policies may change during the time leading up to the camp and depend as well on the policies of Swarthmore Friends Meeting. PhillyKinder will email updates if applicable.

_____ If my child shows any signs of illness, including, but not limited to, fever, shortness of breath, or persistent dry cough, loss of taste or smell anytime in the 24 hours prior to class, my child will stay at home. In addition, I understand that if my child has taken any fever reducing medications in the past 24 hours, they may not attend camp.

_____ Families and staff are kindly requested to observe all existing health mandates and recommendations in their personal interactions outside this program.

_____ I give permission for my child to be taken on foot to the nearby trail system with supervision by a teacher.

_____ I understand that camp staff reserves the right to remove a participant from camp for unruly behavior and disciplinary challenges.

_____ I am responsible for my child at all times before and after camp.

Enrollment, Payment, and Cancellations

- The program fees can be paid either by check (made out to *PhillyKinder*), cash or via PayPal (with an additional convenience fee of 2.5%).
- Camp must be paid in full before the start of the program.
- In case of financial hardship please contact the *PhillyKinder* administration at phillykinder@gmail.com.
- Cancellations must be made via email to pksommerlager@gmail.com.
- If PhillyKinder has to cancel camp due to lack of enrollment, all paid fees will be refunded. The convenience fee for PayPal payments will NOT be refunded.

Coronavirus (COVID-19) Warning

PhillyKinder has developed policies and procedures for its programs based on state and CDC guidelines. However, COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact. Federal and state authorities recommend Covid-19 vaccination, mask wearing and social distancing as a means to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, permanent disability, and death. Participating in PhillyKinder programs or accessing PhillyKinder-rented facilities could increase the risk of contracting COVID-19. PhillyKinder in no way warrants that COVID-19 infection will not occur through participation in PhillyKinder programs or accessing facilities rented by PhillyKinder.

PhillyKinder Event Waiver and Release

In consideration of being permitted to utilize the facilities, services and programs of PhillyKinder (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in program, the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program and its protocols including, but not limited to Covid-19 prevention procedures. It is further warranted that such entry into the facility for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated program including Covid-19 prevention procedures have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

The undersigned is aware of the different types of activities, equipment, and facilities offered by the organization, and is aware of the risks inherent in the participation in such activities and use of such equipment and facilities, including, but not limited to possible Covid-19 exposure.

In further consideration of being permitted to enter the facility for any purpose including, but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the organization, the undersigned hereby agrees to the following:

1. The undersigned on his or her behalf and behalf of such children, hereby releases, waives, discharges and covenants not to sue PhillyKinder, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury or illness, including, but not limited to Covid-19, to the person or property or resulting in death of the undersigned or such children whether caused by the negligence of the releasees or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with PhillyKinder.

2. The undersigned hereby agrees to indemnify and save and hold harmless the releasees and each of them from any, loss, liability, damage or cost they may incur due to the presence of the undersigned or such children in, upon or about the premises or in any way observing or using any facilities or equipment of the organization or participating in any program whether caused by the negligence of the releasees or otherwise.

3. The undersigned hereby assumes full responsibility for and risk of bodily injury, illness, including, but not limited to Covid-19, death or property damage to the undersigned or such children due to negligence of releasees or otherwise while in, about or upon the premises and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with PhillyKinder.

The undersigned further expressly agrees that the foregoing release waiver and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the State of Pennsylvania and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

The undersigned has read and voluntarily signs the release and waiver of liability and indemnity agreement, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

I HAVE READ AND UNDERSTAND THE ABOVE, AND I ACCEPT AND AGREE TO ALL OF THESE TERMS AND CONDITIONS.

Signature _____ Date _____