

**For Internal Use Only**

**Medical Form Received:** \_\_\_\_\_

**Date Received:** \_\_\_\_\_

**Payment:**

\_\_\_\_\_ Weekly \_\_\_\_\_ Monthly

\_\_\_\_\_ Daily

**Additional Contacts:**

**Phone:**

**Email:**



The Waverly Community House is a 501(c) 3 charitable organization committed to offering educational, recreational and cultural opportunities to individuals and families in the region.

Waverly Community  
House, Inc.

**Comm Kids  
After School  
Child Care  
Program**

*A State Licensed Child Care Service Center*

June 2016—June 2017

**“Helping Families  
Work”**

◇ **Full Day Extended Summer Sessions**

June 13—June 24, 2016 and August 15—September 2 (start of school)

**When:** M—F 9am-5pm, Grades: K—7

**Program:** Supervised play, activities Fee: \$36 per day, \$26 half day.

◇ **Summer Comm Camp Sessions**

June 27—August 5, 2016

**When:** M-F 3pm—5:00 , immediately following Comm Camp

**Fee:** Included with Comm Camp extended day fee or

\$15.00 per day, exclusive of camp. See Comm Camp brochure.

◇ **CommKids After School Fall 2016 - Spring 2017**

**When:** M—F 2:30—6pm Start date varies with first days of school.

**Grades:** K—7 **Fee:** \$80.00 weekly first child, \$75 additional siblings or \$18.00 per day first child, \$15 for additional siblings.

**MORNING KINDERGARTEN:** M—F 11:30—6pm, Full day, 11:30—2:30pm, Half day

**Fee:** \$32 Full Day or \$160 Weekly or \$18.00 half day

**Program:** Homework, snack, supervised free play and activity

Children will have access to all of the Comm recreational and library facilities while under the supervision of CommKids After School staff

**STAFF**

**Director:** Alexandra Colombo, Assistant Director, Kaylee Cummings, Certified Teacher, Assistant Instructors

**Executive Director::** Maria Wilson

**Where:** After School room, located in the main lower level,  
Waverly Community House  
1115 North Abington Road, Waverly PA 18471

**Transportation:** Varies, depending upon school and session. Fees may apply.  
Pick up by parent/guardians.

Medical Forms must be submitted with Registration. Up to Date Immunizations required

Please Note: Additional forms may be required upon registration

Registration: In advance, online or at the Comm, [www.waverlycomm.org](http://www.waverlycomm.org)

Payment: In advance, cash , check or credit card. Cards will be charged in advance of week. For further information call

570-586-8191 ext. 6 for Alexandra Colombo, After School Program, or [emailcommkids@waverlycomm.org](mailto:emailcommkids@waverlycomm.org)

**Waverly Community House Afterschool Program Registration Form  
(Please detach this sheet and return)**

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

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

Name of School: \_\_\_\_\_

School Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

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

Parent/Guardian Names: \_\_\_\_\_

Day Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

**Release:** *I/we do not, will not hold The Waverly Community House or its employees, Board of Trustees, volunteers or Waverly Township responsible for any accident or injury incurred by my children or myself while participating in this program..*

Parent/Guardian Names (please print): \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_

\_\_\_\_\_

Please select Program  
\_\_\_\_ 2016/2017 School Year \_\_\_\_ Summer Extended

Make checks payable to *The Waverly Community House* and return to:  
**Waverly Community House,  
P O Box 142, Waverly PA 18471.**

**Method of Payment:**

Check      Cash      VISA      MC      AMX      DISCOVER

**Credit Card #:**

\_\_\_\_\_

**Expiration Date:** \_\_\_\_\_ **CVV:** \_\_\_\_\_

**Cardholder Signature:**

\_\_\_\_\_

**Check/MO #:** \_\_\_\_\_ **Amt:** \$ \_\_\_\_\_