



2025 Summer Registration Information

~ All care provided at the Good Shepherd Building, 3288 East Henrietta Road, (585) 359-7911 ~

Welcome to the Rush-Henrietta Cub Care Zone (C²Z) 2025 Summer program! Our program will operate from June 30 to August 22, 2025, excluding July 4. Hours of care are 6:30 A.M. to 6 P.M.

Your child will be placed in an age-appropriate group with children of similar ages. Some groups will be mixed ages, and placement may vary from week to week depending on the number of children registered. We will have limited field trips this summer, but plan to bring guest speakers in each week. Speakers will be scheduled on most Tuesdays and/or Thursdays; we will do our best to schedule field trips on Wednesdays. During weeks that the pool is available, open swim will take place at the high school pool on Mondays (for grades Pre-K through 1st) and Fridays (for grades 2nd through 6th). Every Friday there will be a refreshing summer treat for everyone.

As always, our program will offer a variety of high-quality, fun, engaging, and educational activities throughout the summer.

In particular, we plan to emphasize:

- age-appropriate science programming
- outdoor activities
- large motor skills development
- reading and writing activities
- creative projects
- age-appropriate games
- quiet time

Each week's activities will go along with the weekly theme.

Summer is a wonderful time to be outside. Every day, please provide labeled:

- sun screen lotion
- hat or visor
- water bottle
- change of clothes
- towel

Appropriate footwear is also expected. Make sure your child is dressed to be active and have fun!

Summer Meals Program

This summer, we will participate in the district's free summer meals program. **FREE** lunch will be provided to all Cub Care participants most days between July 7 to August 15. You will still be responsible to provide a lunch on some field trip days AND when the Summer Meals Program is not available.

On days when a child must bring a lunch from home, please send a ready-to-eat meal.

We cannot refrigerate or microwave lunches brought from home.

We will provide a morning and afternoon snack each day.

All Cub Care Zone guidelines are found in the *Cub Care Zone Handbook* and apply to summer care. We are not licensed to give medication other than emergency Epi Pens and inhalers. If your child requires one of these emergency medications, you must provide the medication in the original box and provide written documentation from the doctor.

See the back of this form for payment deadlines, late fee information, and the summer refund policy.

If your child is currently a member of the 2024-2025 Cub Care program, registration is easy! Simply turn in this completed Registration Form to the Cub Care main office at the Good Shepherd building. • Payment is due before the registration deadline.



2025 Summer Registration Form

Date Submitted: _____

Child's Name: (Last) _____ (First) _____ (Middle Initial) _____

Date of Birth: _____ Gender: _____ School: _____ Grade 2024-25: _____

Phone (Primary): _____ Phone (Secondary): _____

Preferred Email: _____

Currently registered for any Pre-K to 6 C²Z program? Yes – Continue below

No – Stop, call 359-7911 to register (\$25 fee) and start the enrollment process.

Please indicate the week(s) when care is needed:

Week Needed	Date (circle date(s) needed)	Registration Deadline	Fee/week	\$10/day Late Fee [^]	Week Total
	Care is provided on June 26 and 27. Please see the 2024-2025 Non-School Day Registration Form.	6/12/2025	XXXXXX	XXXXXX	XXXXX
	June/July 2025 <i>Sparkle, Crackle, Boom</i> (2 min days) 30 1 2 3 Total days: ____ x\$60	6/16/2025	\$	\$	\$
	July 2025 <i>Sports Mania</i> (min 3 days) 7 8 9 10 11 Total days: ____ x\$60	6/23/2025	\$	\$	\$
	July 2025 <i>Pirate Fever</i> (min 3 days) 14 15 16 17 18 Total days: ____ x\$60	6/30/2025	\$	\$	\$
	July 2025 <i>Experimentation Nation</i> (min 3 days) 21 22 23 24 25 Total days: ____ x\$60	7/7/2025	\$	\$	\$
	July/August 2025 <i>Fairytale Fantasy</i> (min 3 days) 28 29 30 31 1 Total days: ____ x\$60	7/14/2025	\$	\$	\$
	August 2025 <i>Safari Season</i> (min 3 days) 4 5 6 7 8 Total days: ____ x\$60	7/21/2025	\$	\$	\$
	August 2025 <i>Music Feast</i> (min 3 days) 11 12 13 14 15 Total days: ____ x\$60	7/28/2025	\$	\$	\$
	August 2025 <i>Feast of Fun</i> (min 3 days) 18 19 20 21 22 Total days: ____ x\$60	8/4/2025	\$	\$	\$

[^]Late fee charged if registration is submitted after that week's registration deadline.
Refunds are issued only when the request is made one week in advance.

TOTAL: \$

Parent/Guardian Signature: _____

Date: _____

Method of Payment: Visa MasterCard Check (# _____) Cash (rcpt # _____)

If you are paying with Visa or MasterCard and did not already sign a Credit Card Authorization form, complete the following:

Credit Card #:

Expiration Date (MM/YY):

CVC# (from back of card):

Print Card Holder Name: _____

Billing Address on Account: _____

Card Holder Signature: _____