



We'll handle the kid stuff.

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Hello CLEO Parents!

Thank you very much for your interest in the Conference on Lasers and Electro-Optics (CLEO) children's program. Our goal is to provide your children with a program *they* want to attend, while providing you with that critical "peace of mind" feeling so you can attend your event activities.

KiddieCorp is pleased to provide a children's program during CLEO. KiddieCorp is in its thirty-third year of providing high-quality children's programs and youth services to conventions, trade shows and special events. We take caring for your children very seriously. KiddieCorp has enjoyed a long-time partnership with the American Academy of Pediatrics, which has helped to establish KiddieCorp as a premier provider of event children's program services.

ACTIVITIES

Activities include exciting themes, arts & crafts, group games, music & movement, board games, story time, dramatic play, etc. We provide activities appropriate for each age group, using safe, sturdy equipment that you can feel comfortable with. Children can make their own choices within KiddieCorp's program.

COMMITMENT

Our goal is to provide your children with a comfortable, safe and happy experience. Our staff-to-child ratios are high to ensure that every child feels special (1:2 for children ages 6 months through 11 months old; 1:3 for children ages 1 through 2 years old; 1:5 for children ages 3 through 5 years old; 1:7 for children ages 6 through 12 years old). KiddieCorp team members are selected according to their integrity, experience, education and enthusiasm. They must be wonderful with kids! In addition to our selective and competitive hiring process, KiddieCorp remains at the top of the industry by carrying ample liability insurance.

WHERE, WHEN, FOR WHOM

The program is for children ages 6 months through 12 years old. The dates for the program are May 6 - 10, 2019 and will be located at the San Jose McEnery Convention Center in San Jose, California.

Please note: Medication (including sunscreen) will NOT be administered by KiddieCorp management or staff.

REGISTRATION

Children must be registered for child care directly through KiddieCorp. The attached registration form must be submitted directly through KiddieCorp. See the registration form below for event information. The advance registration deadline is April 22, 2019. Register early as availability is limited and handled on a first-come, first-served basis. You are also welcome to register on-site, however, there is no guarantee and it is not recommended.

NEED MORE INFORMATION?

KiddieCorp is always available to answer any questions. Feel free to contact KiddieCorp by phone at (858) 455-1718 or by e-mail at info@kiddiecorp.com. You can also register on-line at <https://www.jotform.com/KiddieCorp/cleokids>.



CHILDREN'S PROGRAM REGISTRATION FORM

- CLEO • May 6 – 10, 2019 -

Parent Info: Last Name _____ First Name _____

E-mail address: _____ Phone: (____) _____

	Name(s)	Age(s)	Hours Needed
Monday, May 6 8:00am - 6:30pm	1 _____	_____	_____
	2 _____	_____	_____
	3 _____	_____	_____
Tuesday, May 7 8:00am - 7:30pm	1 _____	_____	_____
	2 _____	_____	_____
	3 _____	_____	_____
Wednesday, May 8 8:00am - 7:30pm	1 _____	_____	_____
	2 _____	_____	_____
	3 _____	_____	_____
Thursday, May 9 8:00am - 7:00pm	1 _____	_____	_____
	2 _____	_____	_____
	3 _____	_____	_____
Friday, May 10 8:00am - 4:30pm	1 _____	_____	_____
	2 _____	_____	_____
	3 _____	_____	_____

Check here if your child(ren) has any special needs under the Americans with Disabilities Act. We will contact you.

Although every effort will be made to accommodate late or on-site registrations, there is no guarantee that KiddieCorp can accept children unless they are pre-registered.

- KiddieCorp staff does not administer medication. To ensure a safe and fun-filled environment, any child who is ill will not be admitted to the children's program.
- Please label your child's belongings. We will maintain a lost and found, however, KiddieCorp does not accept responsibility for the loss or theft of any toy, book, or other personal items.
- For parents with infants, please bring diaper changing supplies, formula/baby food, and a change of clothes.

CLEO
CHILDREN'S PROGRAM CONSENT FORM

- **Child(ren)'s first and last names:**

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

- **Please list only those allowed to check-out the above child(ren) from the KiddieCorp children's program (please list first and last names; photo ID may be required when checking out children):**

Name _____ Relationship to child(ren) _____

Name _____ Relationship to child(ren) _____

- **Are any of your children allergic to anything (foods, etc.) or are any of your children taking medication? If yes, explain: (Note: KiddieCorp staff does not administer or assist in the administration of any medications.)**

- **Do any of your children have health limitations or special needs? Any birthmarks or injuries we should be aware of?**

We, the undersigned adults, agree to place our child or ward in the KiddieCorp children's program. For ourselves, our child/ward (or children/wards), and each of our respective heirs, assigns, and next of kin, we hereby release and agree to indemnify and hold harmless KiddieCorp, CLEO, The Optical Society and their respective officers, directors, agents, employees, assigns, vendors, and the owners and/or lessors of the facility or facilities where the program will be held (collectively "the Releasees"), from any and all claims which may now or hereafter arise from our child's/ward's (or children's/ward's) participation in the KiddieCorp program. We do not release claims arising from Releasees for any of their willful misconduct or gross negligence.

Photographs taken throughout the children's program may be used for promotion and/or publication by CLEO, The Optical Society and KiddieCorp, Inc.

We have read the above and understand this release. Furthermore, in the event of an emergency or health concern, KiddieCorp has our permission to administer first aid, contact our pediatrician, or obtain emergency medical treatment for our child. We agree to pay all expenses incurred due to an emergency involving our child.

Signature: _____ **Date:** _____

Parent/Guardian Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (home) (____) _____

Cell #: (____) _____ E-mail: _____

Pediatrician's Name: _____ City: _____

Emergency Contact (Someone who is not at this location with you): _____

Emergency Contact Phone: (____) _____

We suggest you make a copy of your completed form as a reference. Confirmations will not be sent. KiddieCorp reserves the right to limit participation of any child whose presence or behavior may disrupt the program or endanger the health or safety of others.