



2350 Broadway Ste. 215A
New York, NY 10024
www.poly-ed.com
andrew@poly-ed.com · (914) 473-1836

Poly Ed Summer 2026

Schedule

All sessions run Monday-Friday, 9:00 am - 3:30 pm.

Please indicate the sessions for which you are registering:

- ☐ Math and Algorithms / June 15-19
 - ☐ BattleBots / June 22-26
 - ☐ AI and Learning / June 29-July 3
 - ☐ Handheld Video Game Design / July 13-17
 - ☐ Hacking and Cracking / July 20-24
 - ☐ Weather Balloon Telemetry – Leaving the Ground Behind / July 27-31
 - ☐ Board Game Design / August 3-7
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Tuition

Tuition is discounted for multiple sessions as follows:

Single session: \$1100/ student

2 sessions: \$2000/student

3 sessions and up: \$950/week/student

A deposit of \$500/week of registration is required to reserve your place, with the balance due by June 10, 2025.

Please note that registration and space are limited.

Tuition includes all field trips and travel charges, there will be no additional fees.

Digital payment can be made by:

Paypal – andrew@poly-ed.com

Venmo - @PolyEd

Zelle (Chase QuickPay) – andrew@poly-ed.com

Please note that our grade guidelines are flexible to accommodate students who may have advanced far beyond grade level in their studies. We want to find the right fit for your student, and everyone is different. Please contact us if you believe your student would benefit from enrollment in a session that varies from his/her grade in school.

Registration Form 2026

General Information

Name of Student: _____

Grade (2026-2027): _____

Sex: _____

DOB: _____

Address: _____

City: _____

State: _____

Zip: _____

Parent or Guardian Name(s): _____

/

Parent or Guardian Cell

Number(s): _____

/

Parent or Guardian Email(s) _____

/

Place(s) of Employment: _____

/

Address(es) of Employment: _____

School Attending: _____

Address of School: _____

Dismissal

Please list the names of people other than yourself who you authorize to take your child from Poly Ed when class is dismissed. (Children will not be permitted to leave with anyone without authorization from a parent or guardian. IDs will be checked before a child is released.)

_____ Initials

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Your student must be picked up promptly at the end of class. Should you repeatedly fail to pick up your student on time without extenuating circumstances, this may result in cancellation of registration and removal from our class without reimbursement of tuition for future classes.

_____ Initials

Emergency and Medical Contact

Please list the names of people other than yourself who we may contact in case of an emergency if you cannot be reached. In addition, these people are authorized to take your child from Poly Ed in the event of an emergency if you cannot be reached. (Children will not be allowed to leave with anyone without authorization from a parent or guardian. ID's will be checked before a child is released. _____ Initials

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Student's Primary Physician's Name: _____ Physician's Phone: _____

Physician's Work Address: _____

Allergies: _____

Medical Conditions: _____

Medications: _____

In the event of an emergency I give Poly Ed my permission to call emergency services to care for my child, including necessary transportation. This may happen if Poly Ed cannot contact me. I further understand that medications will not be administered by Poly Ed. _____ Initials

Lunch

A daily, nut free snack will be provided to all campers.

If you will be packing your own lunch, out of respect for other students and potential allergies, students should pack a NUT FREE lunch daily. _____ Initials

Vaccination Information

Please note that all students are required to be fully vaccinated, with “full vaccination” taken from the current CDC definition at the time of camp. Please return an image of your student’s vaccination card (front and back) with this form **if not already on file with Poly Ed.**

☐ First Vaccine Received Date: _____

☐ Second Vaccine Received Date: _____

☐ Booster Dose Received Date: _____
