



# LONGFELLOW WELLESLEY

## FEBRUARY SCHOOL VACATION PROGRAM 2026

**Ages 3 - 5 years**

School vacation is a great time for kids to move, play, create, and connect, and Longfellow Wellesley is excited to offer a safe, active, and welcoming place for them to do just that! Our February Vacation Program keeps children engaged and energized throughout the day with a thoughtful balance of structured activities and free play. Led by our experienced children's programming team, each day encourages movement, creativity, friendship, and fun.

**Arts & Crafts • Games on the Pickleball Court • Outdoor Play • Free Play**



### Program Dates

- Tuesday, February 17th
- Wednesday, February 18th
- Thursday, February 19th
- Friday, February 20th

### Program Pricing

- **Full Family Members:** \$50 per day
- **Couple and Individual Members:** \$65 per day
- **Non-Members:** \$80 per day

### What to Bring

Please pack a nut-free lunch, two snacks, a water bottle, and a change of clothes each day.

**Daily Schedule:** 9:00 AM – 1:00 PM

### Questions?

Contact Preschool Director Stefanie Stolpinski at  
[wellesleypreschool@longfellowhealthclubs.com](mailto:wellesleypreschool@longfellowhealthclubs.com)



# Longfellow Wellesley February School Vacation Program 2026

## Registration Form

Child Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Child Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Parent/Guardian Name: Contact Details:

1 \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

2 \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email (for news and updates): \_\_\_\_\_

Allergies or Medications: \_\_\_\_\_

Anything we need to know? \_\_\_\_\_

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

Please Check Program Days Attending

- |  |   |
|--|---|
| <input type="radio"/> Tuesday, February 17th   | <input type="radio"/> Thursday, February 19th |
| <input type="radio"/> Wednesday, February 18th | <input type="radio"/> Friday, February 20th   |

Payment Method: Forms can be emailed to [longfellowkids@gmail.com](mailto:longfellowkids@gmail.com) or dropped off in person to our front desk. If you want to use your card on file, please write "Card on File" and sign below.

Credit Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ I

HAVE READ AND I UNDERSTAND THE FOLLOWING: NO REFUNDS WILL BE MADE. IF A DOCTOR'S NOTE FOR ILLNESS IS RECEIVED A CREDIT WILL BE ISSUED; THERE ARE NO REFUNDS OR CREDITS FOR ABSENCES, NO SHOWS OR EARLY DISMISSALS. WE RESERVE THE RIGHT TO DISMISS A CHILD WHOSE BEHAVIOR IS DETRIMENTAL TO THE OVERALL GOOD OF THE PROGRAM.

Health Insurance Company: \_\_\_\_\_ Group Policy #: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_