

GREENSBORO MONTESSORI SUMMER CAMP

2005 REGISTRATION FORM

Session Dates:

Session 1 - June 20-24
 Session 2 - June 27-July 1
 Session 3 - July 11-15

Session 4 - July 18-22
 Session 5 - July 25-29

Early Care: 7:30 - 8:30 all sessions

Camps:

Please circle below the camp group and sessions you're choosing

Group	Ages	Times	Weekly Fee	Sessions	Early Care(\$25/wk)
A. Habla Espanol!	2,3	8:30 - 11:30	\$130.00	1,2,3,4,5	___ wks.= \$ _____
B. Take a Giant Step!	3	8:30 - 11:30	\$130	3,4,5	___ wks.= \$ _____
C. Immerse Yourself!	4,5	1:00 - 4:00	\$130	3,4,5	___ wks.= \$ _____
D. Moving On Up! (half day)	6,7,8	8:30 - 12:00	\$140	3,4,5	___ wks.= \$ _____
E. Moving On Up! (full day)	6,7,8	8:30 - 3:00	\$225	3,4,5	___ wks.= \$ _____
F. An Itch to Stitch!	6 to 9, parent	8:30 - 12:00	\$140 child, adult \$80.	3,4,5	___ wks.= \$ _____
G. Happy Trails!	9 to 13	8:00 - 3:00	\$240	3,4,5	___ wks.= \$ _____

Registration:

Name of child: _____ Birthdate: _____ Age: _____
 Address: _____ City/zip _____
 Name of Parent or Guardian: _____ Home telephone: _____
 Mother's work phone: _____ Cell: _____ Father's work phone: _____ Cell: _____
 Emergency contact (other than parent): _____ Relation: _____ Phone: _____
 Authorized transportation list: _____
 The following may not transport my child: _____

Emergency and medical information will be taken from the 2004-2005 School Emergency Forms if your child is already enrolled in the school. If there is information that needs to be changed, please call the office. If your child is new to the school, you will need to mail/fax in a copy of the child's immunization records and fill out an emergency card on the day he/she enters. Our fax number is: 665-9351.

Payment for the first reserved week should accompany the registration form. All other weeks may be reserved with a \$25 non-refundable reservation fee for each week. The \$25 fee will be deducted from the tuition from that session.

Blanket Field Trip Permission(6 yrs. through 13 yrs. only) By signing this registration form, I give permission for the above named child to participate in all planned field trips and activities. I also give permission for my child to be transported in the school's bus/and or parent, staff owned vehicles. I understand the facility will use the appropriate child restraint devices and abide by all the safety rules when my child is transported in a vehicle. Signed: _____ Date: _____