

# 2017 PRE-SCHOOL SUMMER CAMP



704-875-2139

[www.phoenixmontessori.org](http://www.phoenixmontessori.org)  
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## **Phoenix Montessori Academy**

**Our mission is:** To develop true scholars, life-long learners, and productive citizens of the world in a diverse atmosphere that incorporates Montessori principals; where students demonstrate respect and love of self, others, and their environment.

Our summer programs have been designed to help young people...

- \*Develop their self-confidence and self-esteem
- \*Become self-reliant and mature
- \*Explore their talents and creativity
- \*Discover a sense of wonder and appreciation for nature
- \*Learn how to resolve conflicts peacefully and make new friends
- \*Develop good habits of health and safety
- \*Learn good sportsmanship

*Phoenix Montessori Academy fully embraces diversity as a core value. The school does not discriminate against employees, applicants or students on the basis of race, religion, national or ethnic origin in its hiring practices or administration of its educational and admissions policies or any school-administered programs.*



# 2017 SUMMER CAMP

## Preschool Camp

### (Ages: 18 months – 5 years)

Some very lucky preschoolers will have the opportunity to spend a day in a cozy environment designed just for them. This camp will provide the children with a wealth of experiences, activities, and projects in a relaxed, yet stimulating, and nurturing environment. The children will engage in hands-on learning activities that will expose them to science, practical life skills, and sensory explorations. They will also engage in various art projects, games, nature studies, and much more.

**Times:** Half Day: 8:30 a.m. – 12:00 p.m.  
Full Day: 8:30 a.m. – 4:00 p.m.

**Dates:** June 19 – 23: **My 5 Senses**  
June 26 – 30: **Fun & Fitness**  
July 10 – 14: **Scientific Explorations**  
July 17 - 21: **Water Works**  
July 24 - 28: **Artistic Expressions**  
July 31 – Aug. 4: **Lego World**  
Aug. 7 – 11: **Naturalist**

**Cost:** Half Day: \$170.00 (per week)  
Full Day: \$230.00 (per week)

**Extended Care:** 7:30 a.m. – 8:30 a.m. (\$15 per week)  
4:00 p.m. – 5:30 p.m. (\$25 per week)

# GENERAL INFORMATION

## Camp Location:

12340 Mt. Holly-Huntersville Road  
Huntersville, NC 28078

## Hours of Operation

Monday – Friday..... 7:30 a.m. – 5:30 p.m.  
Full Day Camp..... 8:30 a.m. – 4:00 p.m.  
Half Day Camp..... 8:30 a.m. – 12:00 p.m.  
Pre-Camp..... 7:30 a.m. – 8:30 a.m.  
Post-Camp..... 4:00 p.m. – 5:30 p.m.  
*All children not signed up for pre-camp should arrive between 8:15 a.m. – 8:30 a.m.*

## Session Dates for Preschool Camp

(one week sessions)

June 19<sup>th</sup> – August 11<sup>th</sup>

Camp Closed the week of July 4<sup>th</sup>.

## Enrollment Procedure

Campers are enrolled by the week, on a first come, first serve basis. Complete the registration form and emergency information, one per child. Return both forms along with your non-refundable deposit of \$50 per week. Photocopies of the forms are acceptable. **Completion of the registration form does not guarantee a space for camp.** The camp agrees to reserve space for the child for the periods specified based upon availability.

## Tuition

Tuition will be due on the Monday, one week prior to the start of each week for all camps by 4:00 p.m. A fee of \$25 will be assessed to all late payments. In the event of late registrations, fees must be paid by the first day of camp. **The camper may not attend camp unless all fees are up-to-date.**

## Refund Policy

The enrollment is for the entire period specified and there will be no refunds or credits, except as follows: If the child is unable to attend due to serious illness or injury that is confirmed in writing by the child's physician, the camp will refund or credit tuition for the number of consecutive days absent, with exception to the first five consecutive days of absence. If the minimum number of attendance is not fulfilled, a refund for the full amount will be issued. **The dates for registration cannot be altered.**

## Lunch and Snack

All campers need to bring their own lunch and snacks packed in a brown paper bag with his/her name written on it. Please send in a water bottle daily. Lunch time is at 11:30. Please provide a list of food restrictions on camper's emergency information sheet.

## What to Bring?

All children ages 18 months to 5 years will need to bring a change of clothes, bathing suit, towel, and water shoes, a fitted sheet and blanket for the nappers, and diapers if necessary. Please make sure to label all your child's belongings.

## Pick-Up

We ask that you please arrive by noon (half-day) or 4:00 p.m. (full-day). A late fee will be charged to anyone who picks up their child(ren) after 12:15 p.m., 4:15 p.m., or 5:30 p.m. for the extended care program. The fee will be assessed at a rate of \$15 for the first 15 minutes and \$2 per minute thereafter.

## Extended Care

Space is very limited! **Extended care is only offered during the times specified under "hours of operation."**



# SUMMER ADVENTURES Registration Form

**CAMPER INFORMATION:**

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age, as of June 1<sup>st</sup>: \_\_\_\_\_ Male  Female   
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Email: \_\_\_\_\_

**FAMILY INFORMATION:**

Parent/Guardian Name(s): \_\_\_\_\_  
 Name of sibling(s) attending summer program: \_\_\_\_\_

Please indicate the program(s) below in which you wish to enroll your child.

**Preschool Camp: Full Day  or Half Day**

*\*A minimum of 8 children must enroll before the class can be offered. You will be notified by June 1<sup>st</sup>, 2017 if a class is cancelled*

**JUNE 19 - 23**

- My 5 Senses**
- Pre-Camp
- Post-Camp
- Deposit \$ \_\_\_\_\_

**JUNE 26 - 30**

- Fun & Fitness**
- Pre-Camp
- Post-Camp
- Deposit \$ \_\_\_\_\_

**July 10 - 14**

- Scientific Explorations**
- Pre-Camp
- Post-Camp
- Deposit \$ \_\_\_\_\_

**JULY 17- 21**

- Water Works**
- Pre-Camp
- Post-Camp
- Deposit \$ \_\_\_\_\_

**JULY 24 - 28**

- Artistic Expressions**
- Pre-Camp
- Post-Camp
- Deposit \$ \_\_\_\_\_

**July 31 – Aug. 4**

- Lego World**
- Pre-Camp
- Post-Camp
- Deposit \$ \_\_\_\_\_

**Aug. 7 - 11**

- Naturalist**
- Pre-Camp
- Post-Camp
- Deposit \$ \_\_\_\_\_

**Total Number of Camps:** \_\_\_\_\_

**Total Amount Enclosed: \$** \_\_\_\_\_

*I understand that a non-refundable deposit of \$50 per class must accompany each student's registration. All deposits will be applied toward the cost of the camp. I am aware that the balance for each camp is due by Monday, one week prior to the start of each session/week of camp by 4:00 p.m. in order for my child's enrollment in the Summer Program to be maintained*

**Note:** This agreement must be signed by both parents/guardians if applicable.

Signature of Parent or Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Parent or Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

**Return form and payment to:** Phoenix Montessori Academy, 12340 Mt. Holly-Huntersville Road, Huntersville, NC 28078 **Questions?** Call Phoenix Montessori Academy, **704-875-2139**

**FOR OFFICE USE ONLY:**

Registration form received: \_\_\_\_\_ Space available: \_\_\_\_\_ Confirmation sent: \_\_\_\_\_

# CAMPER EMERGENCY INFORMATION FORM

(Please Print)

It is required, according to school policy and procedures that the following information is on file for your child no later than the first day of camp.

## CAMPER INFORMATION

Camper's Name:		Camp:	
Mother's Name:	Home Phone #:	Daytime Phone #:	Cell #:
Father's Name:	Home Phone #:	Daytime Phone #:	Cell #:
Home Address:		City & State	ZIP Code:
Emergency Contact Name:	Home Phone:	Daytime Phone #:	Cell #:
Physician's Name:		Physician's Phone #:	
Any Known Allergies:			
Hospital of Choice:			

## AUTHORIZED PERSON(S) ABLE TO PICK UP YOUR CHILD FROM CAMP

Name:	Home Phone #:	Daytime Phone #:	Cell #:
Name:	Home Phone #:	Daytime Phone #:	Cell #:
Name:	Home Phone #:	Daytime Phone #:	Cell #:

If your child does not return to his/her home after camp, please provide the following information:

Name of Care Provider:	Daytime phone #:
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**Statement from parent (s):** If I am unavailable to do so myself, you have my permission to call the physician listed, and in the case of an extreme emergency, my permission to take my child to the hospital I have selected above. I understand that Phoenix Montessori Academy administration has the authority to determine situations of emergency and doctor need.

\_\_\_\_\_  
*Patient/Guardian signature*

\_\_\_\_\_  
*Date*

### Field Trip Release

By executing this document, the undersigned parent authorizes Phoenix Montessori Academy to conduct and involve the child in field trips to public parks, historic sites, and commercial stores within Mecklenburg County.

\_\_\_\_\_  
*Patient/Guardian signature*

\_\_\_\_\_  
*Date*

### Photo Release

I give my permission to Phoenix Montessori Academy to use photographs taken of the above named child at camp for promotional use.

\_\_\_\_\_  
*Patient/Guardian signature*

\_\_\_\_\_  
*Date*