

SUMMER ADVENTURES 2011



704-892-7536

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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

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



SUMMER ADVENTURES

Toddler & Primary Levels

Toddler Camp (ages: 18 months – 3 years)

Twelve lucky toddlers will have the opportunity to spend a day in a cozy environment designed just for them. The Toddler program will provide an abundance of experiences, activities, and projects in a relaxed, yet stimulating, and nurturing atmosphere. Daily activities will include: small and large motor development, exploring nature, games, gardening, songs, dance, and much more. There will be designated water days along with occasional special guest.

Primary Camp (ages: 3 – 5 years)

This camp will provide 18 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. There will be designated water days along with occasional special guest.

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

Dates: June 20-24: **Artistic Explorations**
June 27 – July 1: **Back on the Farm**
July 11-15: **Sensory Explorers**
July 18-22: **Natural Artist**
July 25-29: **Food Art**
Aug. 1-5: **Sports Extravaganza**

Cost: Half Day: \$150.00 (per week)
Full Day: \$200.00 (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:

17609 Old Statesville Rd, Cornelius
(Greater Salem at the Lake)

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 Toddler and Primary Levels

June 20 – August 5

(One week sessions)

Camp will be closed the week of July 4th

Enrollment Procedure

Campers are enrolled by weeks, 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 camp. 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 session 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: In the event that 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 lunch packed in a brown paper bag with his/her name written on it. Please do not send anything that will need to be warmed. Lunch time for the Toddler & Primary classes is 11:15 a.m. The school will provide snacks and beverages for all campers. Please provide a list of food restrictions on camper's emergency information sheet.

What to Bring?

All children will need to bring a change of clothes, bathing suit, towel, water shoes, a fitted sheet and blanket for the nappers, and diapers if necessary. Please make sure to label all of your child's belongings. All toddlers should bring in a box of wipes at the beginning of each session.

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. All fees will be strictly enforced.

Extended Care

Space is very limited! **Extended care is only offered during the times specified under "hours of operation."** At least 5 children have to be enrolled in extended care before it can be offered.



SUMMER ADVENTURES Registration Form

CAMPER INFORMATION:

Child's Name: _____ Birthdate: _____ Age, as of June 1st: _____ Male Female
 Address: _____ City: _____ State: _____ Zip Code _____
 Email: _____

T-shirt Size: 3T Youth: S M L XL Adult: S M L XL

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.

Toddler Camps: Full Day or Half Day **Primary Camps: Full Day or Half Day**

**A minimum of 8 children must enroll before the class can be offered. You will be notified May 20th, 2011 if a class is cancelled.*

JUNE 20-24

- Artistic Explorations
- Pre-Camp
- Post-Camp
- Deposit \$ _____

JUNE 27 - July 1

- Back on the Farm
- Pre-Camp
- Post-Camp
- Deposit \$ _____

JULY 11-15

- Sensory Explorers
- Pre-Camp
- Post-Camp
- Deposit \$ _____

JULY 18-22

- Natural Artist
- Pre-Camp
- Post-Camp
- Deposit \$ _____

JULY 25-29

- Food Art
- Pre-Camp
- Post-Camp
- Deposit \$ _____

Aug. 1-5

- Sports Extravaganza
- 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. The registration deadline is May 20th, 2011. 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. I understand that I am responsible for paying a \$25 late fee for each class I register for after the May 20th, 2011 deadline.

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

Signature of Parent or Guardian: _____ Date: _____
 Signature of Parent or Guardian: _____ Date: _____

Return form and payment to: Phoenix Montessori Academy, 17609 Old Statesville Road, Cornelius, NC 28031
Questions? Call Phoenix Montessori Academy, **704-892-7536**

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:		Email:	

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