

Amy Montessori School Presents..

**2020 Summer Enrichment Programs**

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| *Minimum three mornings* | **Half Days** | **Full Days** | **Tuition****(see rates below)** | **\*$30/Down Payment** |
| *Dates/Theme* | *9:00 a.m.-12:00 Noon* | *9:00 a.m.-3:30 p.m.* |  |  |
| *June 8-12***Down on the Farm** | M T W TH F | M T W TH F | $ | $ |
| *June 15-19***Mad Scientist** | M T W TH F | M T W TH F | $ | $ |
| *June 22-26***Zootopia** | M T W TH F | M T W TH F | $ | $ |
| *June 29-July 2nd*  ***4*** ***DAYS*****Red, White & Blue** | M T W TH | M T W TH | $ | $ |
| *July 6-10***Oceans** | M T W TH F | M T W TH F | $ | $ |
| *July 13-17***Dr. Seuss** | M T W TH F | M T W TH F | $ | $ |
| *July 20-24***Little Chefs** | M T W TH F | M T W TH F | $ | $ |
| *July 27-31***Dinosaurs** | M T W TH F | M T W TH F | $ | $ |
| *August 3- 7***AMS Athletes** | M T W TH F | M T W TH F | $ | $ |
| *August 10-14***Occupations** | M T W TH F | M T W TH F | $ | $ |
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| **3 HALF DAYS** | **4 HALF DAYS** | **5 HALF DAYS** |
| *w/1 full*- **$125.00/$128.44** | *w/1 full*- **$140.00/$143.85** | *w/1 full*- **$155.00/$159.26** |
| *w/2 full*- **$140.00/$143.85** | *w/2 full*- **$160.00/$164.40** | *w/2 full*- **$175.00/$179.81** |
| *w/3 full*- **$160.00/$164.40** | *w/3 full*- **$180.00/$184.95** | *w/3 full*- **$195.00/$200.36** |
| - | *w/4 full*- **$195.00/$200.36** | *w/4 full*- **$215.00/$220.91** |
| - | *-* | w/5 full **$235.00/$241.46** |

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| **3** HALF DAYS **$95.00/$97.61** | **3** FULL DAYS **$160.00/$164.40** |
| **4** HALF DAYS **$115.00/$118.16** | **4** FULL DAYS **$195.00/$200.36** |
| **5** HALF DAYS **$140.00/$143.85** | **5** FULL DAYS **$235.00/$241.46** |



Due with application

Total + $30

$

*Please select a CAMP TSHIRT size*

**□***XS (2-4)***□***S (6-8)***□***M (10-12)*

\*\*Please register ASAP or by Monday, May 4th\*\*

We are so excited to be offering the Summer Enrichment Sessions once again at Amy Montessori School. We have planned many fun filled outside and inside activities. Continuing your child's learning through the summer will reinforce essential skills learned during the year. Our programs are open to enrolled and new students ages 2 ½ through 6 years.

Please Note the week of June 29th is a short week due to The Fourth of July Holiday.

\* 15% discount available for 2nd child. Please see the office for pricing.

\*Prices in red indicate payments using SQUARE w/2.75% if you decide to pay with credit card.

Please complete application and return with a **$30.00** fee **per week** enrolled. This fee will be applied toward tuition. If you sign up and do not show for the week enrolled, you will not receive your $30 back. Tuition is due on or before the first day of each week. Days and payments are non-transferable. If you want to add week(s) during the summer, please see Christine Danneman to make down payment arrangements. One T-shirt is provided per child. If you find your child will not be able to attend a registered week, please notify the office.

 ***Before/After Care is available at $4.00/half hour.***

***(please check if interested)***

☐ ***Before Care (7:30-9:00)***

☐ ***After Care (3:30-5:30)***

***Tuition Rates—1 WEEK SESSIONS***

EMERGENCY CONTACT INFORMATION-TO CONTACT WHEN PARENT IS NOT AVAILABLE.

REGISTRATION INFORMATION

**Child’s Name** DOB Email for Family

Father’s Name Home Phone Cell/Pager

Home Address City Zip Code

Father’s Employer Work Phone

Mother’s Name Home Phone Cell/Pager

Home Address City Zip Code

Mother’s Employer Work Phone

ALLERGY ALLERT

My child is allergic to: (please check those that apply)

☐ Bee sting ☐ Milk/dairy products ☐ Nuts ☐ Wheat ☐Other:

Dietary restrictions (non-allergy):

☐ Egg ☐Beef ☐ Chicken ☐ Pork ☐ Marshmallow/gelatin ☐ Seafood ☐Other

Prescription medications cannot be given without a copy of the physician’s prescription and a completed, AUTHORIZATION TO ADMINISTER MEDICATION form. Prescriptions must be brought to school in the prescription bottle.

The following medications have been prescribed for my child and should be administered per instructions:

☐Epi pen ☐antisistamine☐inhaler☐other:

My child has the following condition(s):

Is any special consideration needed?

PHYSICIAN PHONE

I hereby give permission to Amy Montessori School to secure emergency medical treatment for my child while in AMS’s care.

My child has permission to walk or drive(by AMS parents) to field trips off the school grounds.

SIGNITURE OF PARENT DATE

EMERGENCY CONTACT’S NAME RELATIONSHIP TO STUDENT

ADDRESS PHONE

Names and phone numbers of persons other than parent to whom child may be released. Please send in your child with a completed STUDENT RELEASE form (found at the office) informing us who will be picking up your child. They will be asked to present a photo ID before the child will be released to them.

NAME RELATIONSHIP TO STUDENT PHONE

NAME RELATIONSHIP TO STUDENT PHONE