

Salem Methodist Preschool
2019 Summer Camp Registration – Young 2's and 2's

Please save this page and return the Registration pages.

Welcome to Summer Camp! We will be continuing our program from last year, and also offering **Early Birds and Extended Days**, so we hope that you'll take advantage of this. Please note that our camp is open to all our children, from current Young Two's (must be two as of March 1, 2019) through 4/PreK. We also accept children not enrolled at Salem, so spread the word to your friends and neighbors!

Summer sessions will run from May 29th through June 27th, and July 8th – 18th. You have the option to register for as few or as many weeks as you would like. We will start accepting registrations on **Monday, April 1st** from our enrolled students through April 26th. **On May 1st we will accept registrations from the general public.**

Camp will be held Monday through Thursday each week (first week only Wed. and Thurs.) Times will be from 9:00 a.m. to 12:30 p.m. **Children will be enrolled in their current age level.**

Each week will have a different theme (listed on next page) and lunch will be included. Cost will be \$110.00 for a three day week and \$140.00 for four days per week. **(Two day options (\$80.00) will be offered (but not recommended – except for first week) and must be either a Mon/Wed or Tues/Thurs. See office for details.)**

We are really excited to continue this program and the teachers have been planning for months to explore some new and fun activities. We will spend a lot of time outside (weather permitting) and we will try to get in a water day each week – also weather permitting. The two's classes will have **water table play**, so no changing will be done. Water shoes can be sent in and a towel is optional. Please label and put in a separate bag that can be left at school for the week.

Don't forget our annual **Red, White and Blue parade and picnic on Thursday, June 27th** to end our first block of camp! More information will be sent home at the start of each week. Watch for notices and posted signs.

***Please have your child dress in comfortable play clothes with gym shoes. Please send a backpack with a change of clothes every day. **Sandals and crocs are not allowed.** We are outside and on the move for most of the morning and the children need to be able to run and play comfortably.

Thank You! We look forward to a great summer with your children!

Cindy and Sandy

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Please complete all pages.

To register your child for Salem Summer Camp, please fill out the following pages and return them with a **one-time \$20.00 non-refundable Registration Fee** (per child). The full camp tuition payment will be due by **June 6, 2019**.

***Please let us know if your child has **allergies**. Paperwork will need to be filled out.

*****Registration is first-come, first-served. Please return by April 25th *****

We will do our best to get your child in all requested weeks.

Child's Name _____ Birth Date _____ Gender _____

Present School _____ **Current Class Level** _____
(Children will be placed according to age as of Sept. 1, 2018)

Please check the week(s) you prefer. Price given is for 4 days per week, (2 days - first week.)
See office for fewer day pricing. We encourage a minimum of 3 days per week. (Circle dates if less than 4.)

____ Week 1 - May 29, 30	Theme – Wide World of Sports	\$80.00
____ Week 2 - June 3, 4, 5, 6	Theme – Spy School	\$140.00
____ Week 3 - June 10, 11, 12, 13	Theme – Baby Shark	\$140.00
____ Week 4 - June 17, 18, 19, 20	Theme – Down on the Farm	\$140.00
____ Week 5 - June 24, 25, 26, 27	Theme – Red/White/Blue-Games (Parade + picnic on Thurs!)	\$140.00
____ <u>Break</u> (Ext. A) – July 1, 2, 3	Extended Care only. See office if care is needed.	
____ Week 6 - July 8, 9, 10, 11	Theme – Rainforest	\$140.00
____ Week 7 - July 15, 16, 17, 18	Theme – Under the Stars	\$140.00
____ <u>Break</u> (Ext. B) - July 22, 23, 24, 25, 26	Extended Care only. See office if needed.	

Special considerations: _____

Parent/Guardian Signature _____ Date _____

****Please turn over to sign and complete back page and Emergency Information page.**

Office Use: Date Received _____ Time _____ \$20.00 Reg. Fee Check # _____ Cash _____

Extended Day Registration (if needed)

_____ I am interested in utilizing **Early Birds:**

Days/Dates _____

Times - Please circle: 7-7:30(\$25) 7:30-8(\$20) 8:-8:30(\$15) 8:30-45(\$8) 8:45-55(\$6) per day

If you need care every day, early or late, please see office for full-time rates.

_____ I am interested in utilizing **Extended Days:**

Days/Dates: _____

Times – Please Circle: 1:00 pm (\$10)

(If you need Extended Care please contact office)

******Please check and sign below.******

_____ Enclosed is the **\$20.00 one-time non-refundable Registration Fee.**

_____ I understand that the camp tuition payment will be **paid in full by Thurs, June 6th, 2019.**

Cancellation Policy: If you need to cancel a week of Camp, \$25.00 (first week) or \$50.00 (2nd thru 7th weeks) will be refunded to you. We will not refund if your child is sick unless they are out for the entire week.

Registration Forms will be accepted immediately upon receipt (in-house students) and May 1st (new students.) **Please return by April 26th so that we may set classes and staff. First come, first served. Please note that registrations that come in after May 10th will be charged an extra \$5.00 per day.** (This does not pertain to added days.)

Confirmations will be sent home by May 20th.

*****Parent /Guardian Signature** _____ **Date** _____

Emergency Information

For all families, this emergency information must be filled out prior to your child starting camp. Please keep your phones on while your child is at Camp.

Child's Name _____

Parent/Guardian Names _____ Cell _____

_____ Cell _____

Address _____ City _____ Zip _____

Best Phone to reach us _____ (please have phones on!)

E-mail _____

*****Allergies?** Yes ___ No ___ If yes, please list _____

Anything special we should know about your child? _____

If your child has allergies we will need to have **health forms filled out prior** to your child starting camp. We will mail them to you if they are not already on file. Please fill them out and return **before** your child starts camp. If medications are needed, they must be brought prior to or on the first day of camp.

Emergency Contacts

Name _____ Relationship _____ Cell Phone _____

Name _____ Relationship _____ Cell Phone _____

Individuals allowed to pick up my child:

Name _____ Relationship _____ Cell Phone _____

Name _____ Relationship _____ Cell Phone _____

If neither parent can be contacted in case of a serious illness or injury, I authorize the school to take such emergency action as may be deemed necessary, including transportation to a hospital or medical center.

Parent/Guardian Signature _____ Date _____