

**Calvary United Methodist Preschool**

**Summer Camp 2019**

Open to ALL children that have completed a three year old program, up through children that have completed kindergarten. (3.5-6)

(with permission, younger children may attend 3 days a week for $75.)

 $115/week or $100 for 3+ weeks 9am-12pm

     

Week 1 **Cooking & Baking with Laura Numeroff-**  7/8-7/12

 Your child will love meeting Mouse, Pig, Moose,

Dog and Cat in these silly sequential stories that follow

a pet through their shenanigans after they ask for a treat.

We will be baking or cooking the treats each day, as well

making art to tie in with the books.

Week 2 **Diggin’ Dinosaurs!-** Learn about these giant creatures 7/15-7/19

 through online research, non fiction books as well as some

 funny stories and songs. There will be homemade

 fossils and rocks and gems to discover.

Week 3 **Lego Frenzy!-** Bring them to camp to dump their legos 7/22-7/26

everywhere! We have lego sets, lego math duplos, lego

challenges and just plain old legos. They will even do lego

art!

Week 4 **Exercise and Fitness-** Learning about staying healthy is 7/29-8/2

 Important at every age. Spend this week doing fun kid

sized activities like yoga, parachute, obstacle courses,

and playground games like red rover, and red light green

light! We will also talk about healthy eating habits!

Week 5 **Artist week-** Do you have a budding artist on your 8/5-8/9

hands? This week we will instruct your kids to paint like

Picasso, Monet, Michaelangelo… You will be surprised at

their creations!

Week 6 **So You Want to be in the Circus?-** play fun carnival games and create8/12-8/16

 your favorite circus animals and snacks. Come to this camp to

 perfect your prize winning skills, walk a tight rope, swing on a

trapeze? Well we will see!!

For a small fee, we are offering an optional math and reading tutoring group for 4-6 year olds! Instruction will be provided by Megan Planz, who is certified in elementary, special education and literacy. If your child has struggled at all, or you feel they may regress over the summer, this will be perfect for them. Please email us at lathamcalvaryprek@gmail.comCall 785-5142 or visit our website calvarymethodistpreschool.org for more info`

**Calvary United Methodist Preschool**

**Summer Camp 2019**

**REGISTRATION FORM**

Registration due by April 12th

Today’s Date:­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please choose the week(s) you are registering for: one week is $110, $100 for 3 or more weeks!

Week 1 Cooking and Baking 7/8-7/1 2 \_\_\_

Week 2 Diggin’ Dinosaurs 7/15-7/19 \_\_\_

Week 3 Lego Frenzy 7/22-7/26 \_\_\_

Week 4 Exercise&Fitness 7/29-8/ 2 \_\_\_

Week 5 Artist Week 8/5-8/9 \_\_\_

Week 6 Want to be in the Circus 8/12-8/16 \_\_\_

NEW

\*\*\*My child would benefit from summer academics : $25/week x \_\_\_\_\_ weeks= \_\_\_\_\_\_\_\_\_\_\_ total\*\*\*

*Child’s Full Name*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name child prefers to be called\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male/Female

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Mother’s Name*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Address(if different from child’s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employed by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Office Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Hours\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marital Status Married Divorced Separated Widowed Single Other (circle one)

***Father’s Name***

Address(if different from child’s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employed by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Office Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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E-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marital Status Married Divorced Separated Widowed Single Other (circle one)

Please indicate any allergies your child has\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate any medication your child is taking\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate any custody arrangements we need to know about if your child does not live in the same

home with both parents\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate any information you feel would be helpful to us in caring for your child (i.e.; divorce, recent

trauma, special needs, recent move, etc.) Use back if necessary.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Emergency Contacts**

Name Relationship to Child Best Number to Call

**Preferred Hospital\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Primary Care Doctor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Insurance Carrier\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Policy #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***REMINDER –FULL PAYMENT IS DUE WITH THIS REGISTRATION IN ORDER TO HOLD YOUR SPOT FOR EACH WEEK***

Registration mailed\_\_\_\_\_\_\_\_\_\_\_ Registration received on\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fee Received\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_