

Summer 2017 Exploration & Discovery Camp

Ages 12 months - 5 years

PLEASE NOTE BPS IS A NUT FREE SCHOOL

ATTENDANCE POLICY NO MAKEUP DAYS FOR UNUSED DAYS.

Camp Dates

 Week 1 - June 5
 * Week 5 - July 3

 Week 2 - June 12
 Week 6 - July 10

 Week 3 - June 19
 Week 7 - July 17

 Week 4 - June 26
 Week 8 - July 24

 *Camp closed Tuesday, July 4th

FEE POLICY:

Payment is to be made prior to start of camp.

ALL DEPOSITS AND FEE PAYMENTS

ARE NON-REFUNDABLE AND

NON-TRANSFERABLE.

Forms of payment accepted:
Bank Transfer
Cash
Check
*Credit Card
*(subject to convenience fee).

Snack & Lunch Policy: Campers need to bring a lunch, cup for water, and snacks for each day they are attending camp. Label all items.

We are a nut free zone.

Lunch will be provided for \$3 if student does not have lunch.
Lunches will be heated but

cannot be cooked.

Dress Policy:

Children need to wear appropriate clothing and sneakers. Water days children

need to wear water shoes and their bathing suits to school and bring a change of clothes.

Extra Clothing:

Each child needs to bring a change of clothes, bathing suit, towel, water shoes, & sunscreen, LABELED WITH THEIR NAME.

Nap:

If your child naps they need a small blanket, crib sheet and pillow. LABEL ALL ITEMS!

HEALTH CODMC ADE

HOURS

Early Arrival 8:00 a.m. - 8:45 a.m.

9:00 a.m. -12:00 p.m.

9:00 a.m. - 2:00 p.m.

8:00 a.m. - 5:30 p.m.

CAMP FEES

Prices listed are per week

Early Arrival \$5 per day or \$15 a week

3 days

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8:00 - 5:30	\$255	9 - 5:30	\$212
9:00 - 2:00	\$212	9 - 2:00	\$166
9:00 - 12:00	\$166	*9 – 12:00	\$125

5 days

*Space and days available are limited in the three day 9 - 12 program

Sibling discount \$10 per week

SCHEDULE:

8:00 – 8:45 EARLY DROP OFF

9:00 – 2:00 Classroom activities, music, creative movement, games, special events, snack, outdoor play, science, arts & crafts, water play.

12:00 – 12:45 Lunch

12:45 – 1:45 Naptime (12mos. & 2's)

2:00 – 5:30 Snack, outdoor play, water play, and misc. activities.



Summer Exploration and Discovery Camp Registration Form

STUDENT INFORMATION

Name:	Birth d	ate:	
Address:	City:	Zip:	
List any allergies, serious accide	ents, operations, etc. that your child has had: _		
List all identifying birthmarks	your child has by size & location (Example: Mo	ngolian birthmark):	
	child's picture on BP School website, brochure, ny child's picture on BP School website, broch		
	PARENT INFORMA	TION	
Parent/Guardian:		SS#:	
Work phone:	Cellular phone:	Email address:	
Parent/Guardian:		SS#:	
Work phone:	Cellular phone:	Email address:	
PLEASE INDICATE YOUR C	HOICE:		
	I am registering my child fo	or the following:	
3-day	ProgramMonday Tuesday _	Wednesday Thursday Friday	
5-day	ProgramMonday Tuesday _	Wednesday Thursday Friday	
	9:00- 12:009:00 - 2	2:008:00 - 5:30	
Please select weeks you	ır child will be attending:		
Week 1 _	Week 2 Week 3 Week 4 V	Week 5 Week 6 Week 7 Week 8	
I am obligated to sign and return these forms are not returned with	all required enrollment forms to BISCAYNE PAR in the time requested, my child will lose his/her po	right to cancel registration if payment is in default. I under K SCHOOL EARLY LEARNING CENTER. I understand sition in the Summer Exploration and Discovery Camp and done in accordance with the Summer Exploration and Disc	l that, if d forfeit
D4/1'1		Pot	
Parent/guardian signature		Date	