



## **Elementary Summer 2011 . . .**

*Due to popular demand, the Elementary Summer Camp (6 - 9 yrs) has expanded to include 5 sessions in the schedule this year! Current Kindergarten students are encouraged to join us. This is a fun and fabulous opportunity to "get your feet wet" in the Elementary environment! Non-Montessori School children are always welcome during the summer, so invite your neighbors and vacationing cousins, too! Please register as soon as possible.*

*Hope to see you here!*

## **Choose Chocolate**

### **June 6 - 10**

People are passionate about chocolate! We'll take a closer look at this yummy treat - and there will be lots of tasting! Come explore the history of chocolate and the chocolate-making process. Put on your chef's hat to help with our own chocolate creations. Discover health benefits and much more. Enter our Chocolate World this week...

## **Survivor Pawleys Island**

### **June 13 - 17**

Could you survive the deep woods of Montessori??? (Well, actually, the fenced in area of the Elementary playground!) Join us as we learn how to pitch a tent, make a fire pit, pack a back pack with camping and survival essentials, use a compass, identify trees, and survive a flood! (So, it's really a water day with Midway Fire Department, but skills are still required!) As a thank you to the firefighters who will be here, we will buy them pizza. All our "Survivors" will be asked to pitch in \$3 for this.

## **Discover Hawaii**

### **June 27 - July 1**

There's no place on earth like Hawaii! We'll share the culture, arts, stories, and traditions of the Island people. Experience Hawaii through its music and cuisine. We'll learn the hula and build volcanoes! The six islands make for an interesting geographical study. Our room will be transformed into a beautiful Hawaiian paradise complete with coconut palms, gorgeous flowers and colorful birds. Aloha!

## **Handcrafted Candles and Soap**

### **July 18 - 22**

Soap making history has its origins in the Ancient World! It is creativity at its best with all the fun ways we can personalize our soap. Natural additives will include: loofah, seeds, oatmeal, and so many others. Candles are one of mankind's earliest inventions and also fun to make! We'll use the old traditional method of dipping candles and setting them in glass jars, like the Colonial people. Candles may not be the sole source of light anymore, but they can symbolize celebration, engage the senses, define ceremony and accent homes around the world.

## **Christmas in July**

### **July 25 - 29**

Already counting down to Christmas? No need to wait until December! We'll decorate a tree, sing Christmas carols, and make ornaments - in July! This week we'll delve into "the most wonderful time of the year" with holiday traditions, recipes, stories, and festivities. We will celebrate in true North Pole style with our dramatic presentation of "Rudolf the Red Nosed Reindeer!" So, get out your Advent Calendar... Christmas is closer than you think!

I would like to enroll my child, \_\_\_\_\_, in Montessori School for the following Elementary Summer Session (s):

_____ Session 1	June 6-10	8:30-2:30	Choose Chocolate
_____ Session 2	June 13-17	8:30-2:30	Survivor...on Pawleys Island
_____ Session 4	June 27-Jul 1	8:30-2:30	Discover Hawaii
_____ Session 6	July 18-22	8:30-2:30	Handcrafted Candles and Soap
_____ Session 7	July 25-29	8:30-2:30	Christmas in July

I have enclosed a \$40 registration fee plus \_\_\_\_\_ week(s) tuition for a total amount of \$\_\_\_\_\_  
Each Session is \$160. Register for 4 weeks and get the 4th week at \$130.

**EMERGENCY INFORMATION**

STUDENT'S NAME \_\_\_\_\_ BIRTHDAY \_\_\_\_\_ AGE \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_ HOME# \_\_\_\_\_ WORK# \_\_\_\_\_ CELL# \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_ HOME# \_\_\_\_\_ WORK \_\_\_\_\_ CELL# \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**Person to notify in case of an emergency if parents cannot be located:**

NAME \_\_\_\_\_ HOME# \_\_\_\_\_ WORK# \_\_\_\_\_ CELL# \_\_\_\_\_

RELATIONSHIP TO CHILD \_\_\_\_\_

PHYSICIAN'S NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

HOSPITAL PREFERENCE \_\_\_\_\_

CHILDHOOD DISEASES \_\_\_\_\_

SIGNIFICANT ILLNESS OR PHYSICAL HANDICAPS OR ALLERGIES \_\_\_\_\_

SPECIFIC LIMITATIONS IN ACTIVITIES \_\_\_\_\_

OTHER COMMENTS \_\_\_\_\_

PARENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_