Plymouth-Canton Montessori School

45245 Joy Road
Canton, Michigan 48187-1772
Telephone: (734) 459-1550
Fax: (734) 459-4770
pcmontessori@sbcglobal.net
www.pcmontessori.org

A Quality Summer Program for Children
Aged 18 months through 6 years

Plymouth-Canton Montessori School has been offering exceptional programs for the past 46 years. Come join us for a summer experience that is nurturing, creative, intellectually stimulating, and lots of fun!

Summer Day Camps
June 17-August 16, 2019
June 17 - August 16

Montessori Matters
(For first time fall preschool enrollment only)

A great head start for the school year, this introduction to basic materials and routines smooths the way for children who will begin Montessori preschool classes for the first time in September.

9-10:30 a.m.  Course Fee: $100

Extended hours are available only to children attending themed day camp.

Toddler Summer Day Camp

Children in the toddler room enjoy a smooth transition into the summer program as their environment and the routine of their day remain the same. Added to the curriculum are many enriching and fun outdoor activities. Toddler camp is available to children 18 months through 3 years of age who are already enrolled, and those enrolled for the 2019-2020 school year.

Themed Summer Day Camp
Preschool/Kindergarten

The program includes a broad range of activities designed to meet the developmental needs of young children. Each day brings a balanced blend of learning and play, active and quiet, group and individual experiences. Weekly guests bring interesting and entertaining in-house presentations to the children.

Each week of the summer has its own theme! (See the accompanying flyer for details.) Children will participate in theme-related projects, lots of arts and crafts, field trips, science experiments, dramatic play, cooking, picnics, outdoor time, music, stories, and games. Water is an important ingredient in the summer program; when it gets hot, we go outdoors and get wet! Children between the ages of 3 and 6 are eligible for enrollment. Toilet training is required.

Enrollment

To enroll, fill out both sides of the application form, and send or deliver it to the school, along with a $30 registration fee. Acceptance is on a first-come, first-served basis. Each child will be enrolled according to the preferences indicated on the form as long as space remains. If a particular session is full, we will call you to discuss alternatives.

Staff

PCMS’s professional staff of experienced early childhood educators will lead the program. They are intelligent and nurturing people who bring a wealth of knowledge, energy, and enthusiasm to share with this year’s campers.

Times

Full and half-day programs are available for the nine weeks of the summer session. Day camp meets from 8:45-11:45 a.m., Monday through Friday. Children must be enrolled in day camp for a minimum of three weeks.

Extended hours are available as needed for day campers. The building opens at 7 a.m. and closes at 6 p.m.

Procedural Matters

Clothing: Clothing should be comfortable, practical, and suitable for active play. (Our building is air conditioned, but children do go outdoors daily.) A swimsuit and towel should be sent to school with each child.

All campers will receive a PCMS T-shirt. Be sure to indicate size on the registration form.

Meals and Snacks: Children who stay through the noon hour must bring a lunch with beverage. The school will provide morning and afternoon snacks.

Nap: An afternoon rest or nap period is available for full-day campers. Children who nap should bring bedding (small blanket, sheet, and pillow).

Health: A health form signed by a physician and showing current immunizations is required for all children. Blank forms are available from the office. Up-to-date health forms from the current school year may be used in the summer.

Child Information Page: This page, which provides emergency information, is to be filled out by parents on or before the first day of camp. The page has a space for parents to indicate who may pick a child up from camp. Children will be released only to people whose names appear on the page, so we must be notified if there are changes.

Fees

A $30 non-refundable registration fee is required at the time of enrollment. Charges for the camp sessions are as follows:

- Half day (3-hour session): Toddler $165/week  Preschool/Kindergarten $145/week
- Full day (3-hour session plus unlimited use of extended hours): Toddler $285/week  Preschool/Kindergarten $260/week
- Extended hours (hourly charge for children who need to be at camp more than 3 hours, but who are not attending for the full day): $7 per hour, prorated to the quarter hour.

Full payment for partial summer day camp (fewer than nine weeks) is due on the first day of attendance.

Payment for nine-week summer day camp is due in two installments on June 17 and July 15.

Refunds will be given only when the place is filled by another child.

Questions?

Call us at (734) 459-1550 for further information. We are looking forward to an exciting summer!
PCMS Summer Day Camp 2019 Registration Form

Plymouth-Canton Montessori School is non-sectarian and non-discriminatory in the administration of its policies, and is open to children of any gender, race, color, religion, national or ethnic origin.

General Information:  

Date ____________________

Child's Name __________________________________________ (__________)  Girl _____ Boy _____

Date of Birth ____________________  Age in June 2019 ____________________

Home Address ___________________________________________

Cell Phone # ____________________ Home Phone # ____________________ Email ____________________

School child currently attends ____________________

T-shirt size:  _____2-4 (XS)  _____6-8 (S)  _____10-12 (M)  Does child nap?  Yes  No

Program Preferences: (Please ✔ applicable program)

☐ Toddler Summer Day Camp  ☐ Themed Summer Day Camp  Registration Fee $30  $ ______

Please indicate (✔) weeks child will be attending (minimum of 3 weeks):

<table>
<thead>
<tr>
<th></th>
<th>Wk 1 6/17-21</th>
<th>Wk 2 6/24-28</th>
<th>Wk 3 7/1-3</th>
<th>Wk 4 7/8-12</th>
<th>Wk 5 7/15-19</th>
<th>Wk 6 7/22-26</th>
<th>Wk 7 7/29-8/2</th>
<th>Wk 8 8/5-9</th>
<th>Wk 9 8/12-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morning Camp *</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:45-11:45 a.m.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full Day</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 a.m.-6 p.m.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Regular extended hours are available to half-day campers @ $7 per hour. (Extended hours are available from 7-8:45 a.m. and 11:45 a.m.- 6 p.m.)  Days and hours needed ____________________.

~ Payment for students enrolled for nine weeks can be made in two installments on June 17 and July 15.
~ Full payment is required on June 17 for students enrolled for eight weeks or less.

☐ Montessori Matters (for first-year Montessori preschool students)  $100  $ ______

August 12-16 ~ 9-10:30 a.m.

Please note: Course fee must be paid in full at time of registration.

PLEASE NOTE: The Emergency Information and Release Form on the back of this page must be filled out completely. Make checks payable to PCMS. Return to: Plymouth-Canton Montessori School, 45245 Joy Road, Canton MI 48187-1772

For Office Use Only:  Paid $ ______  Check # ______  Date ______  Health Form Received ______

Paid $ ______  Check # ______  Date ______  Information Page Received ______
Emergency Information:

Child’s Name ____________________________

Mother’s Full Name ________________________

Father’s Full Name _________________________

Telephone #s: Home ____________________ Mother’s Work ____________________ Father’s Work ____________________

Person other than parent to be notified in emergency if parent is not available:

Name ____________________________ Address ____________________________ Phone ____________________________

Physician’s Name ____________________________ Address ____________________________ Phone ____________________________

Health Insurance Carrier ____________________________ Policy #s ____________________________

Medication being taken (name and purpose) ____________________________

Please list any special health problems ____________________________

Please list any allergies and/or foods which should not be eaten ____________________________

Releases and Statements of Agreement:

MEDICAL RELEASE
I hereby declare that I am the parent or legal guardian of the above-named child. I give my consent, in the event that all reasonable attempts to contact me or designated persons above have been unsuccessful, for Plymouth-Canton Montessori School personnel to seek treatment by the physician named above, or in the event the preferred practitioner is not available, by another licensed person.

I hereby release and discharge Plymouth-Canton Montessori School, its agents, employees, and officers, from all claims, demands, actions, or judgments which the undersigned ever had, now has, or may have against the school, its successors or assigned, for all personal injuries or illness, which the child named above may suffer or incur as a result of the actions of Plymouth-Canton Montessori school or in procuring medical treatment.

I certify that the child named above is in good health and free from any communicable disease or illness.

MODEL/PUBLICITY RELEASE
I give permission for the above-named child’s name, photograph, video or voice recording to be used for informational or publicity purposes in news stories, press releases, or similar items.

PAYMENT AGREEMENT
I understand that children are enrolled for complete weeks, and that my agreement to pay charges for each full week is not subject to adjustment for illness or absence. I agree to pay, when applicable, other fees. These may include registration, hourly day care, NSF fees, or late pickup charges. I understand that my child may be denied admission to camp if tuition or fees are not paid in a timely manner.

LUNCH AGREEMENT (required by Michigan Department of Human Services)
I agree to provide a lunch for my child on days when he or she will be at the school during the lunch period.

FIELD TRIP PERMISSION/RELEASE
I give permission for the above-named child to participate in in-house field trips or neighborhood outings with Plymouth-Canton Montessori School. Supervision will be provided by PCMS staff and parents or other volunteers. On any field trip or outing, I understand that Plymouth-Canton Montessori School is not responsible for unavoidable accidents or the negligence or actions of persons not employed by or acting for PCMS.

STATEMENT OF UNDERSTANDING
I have read the program description, policies and information, day care policies and procedures, and fee schedule of Plymouth-Canton Montessori School. I understand and agree with the philosophy and policies; I accept the conditions and terms stated therein.

Parent’s or Guardian’s Signature ____________________________ Date ____________________________