



Plymouth-Canton Summer Day Camp 2025 Programs

7 Weeks - June 23-August 15, 2025

EACH WEEK HAS A THEME!

Themes and in-house field trips coming soon!

TODDLER SUMMER DAY CAMP

**Ages: 18 months-3 years.*

Toddlers enjoy a smooth transition into the summer program as their environment and daily routine 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 2025-2026 school year.*

PRESCHOOL/KINDERGARTEN SUMMER DAY CAMP

Ages: 3-6 years / Toilet training required

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. Our creative teachers have dreamed up many interesting and entertaining activities for the children. Each week of the summer has its own theme!

ELEMENTARY

Ages: 6-12 years / Toilet training required

Our Elementary camp provides opportunity for socialization, learning, and play. Students at this age will enjoy a mix of creative activities, critical thinking challenges, outdoor exploration and more!

ENROLLMENT

To enroll in summer camp, fill out the application form, and send or deliver it to the school, along with the \$40 non-refundable registration fee. Acceptance is on a first-come, first-served basis. *Children must be enrolled for a minimum of 3 weeks.*

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. Registration for additional weeks throughout the summer must be completed by the Thursday prior to the week each child attends and are subject to a additional \$15 Administrative fee.

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.

FEES

A \$40 non-refundable registration fee is required at the time of enrollment for each program. Fees for the camp sessions are:

Half-Day 3-hour session / 9:00 am-12:00 am

- Toddler \$190/week
- Preschool/Kindergarten \$170/week
- Elementary \$170/ week

Full-Day 9:00am-4:30pm

- Toddler \$350/week
- Pre-K/Kindergarten \$325/week
- Elementary \$325/week

WHAT TO BRING

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

Meals and Snacks: Children who stay through noon must bring a lunch with a 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. Up-to-date health forms from the current school year may be used in the summer. Forms are available in the office or on our website.

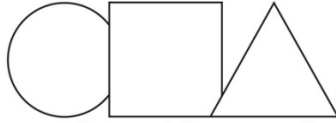
Child Information Page: This page, which includes emergency information, must be filled out by parents on or before the first day of camp. Children will be released only to people whose names appear on the information page, so we must be notified if there are changes. Forms are available in the office or on our website.

QUESTIONS?

Telephone: (734) 459-1550
www.pcmontessori.org

Registration questions?
sborieo@dhmontessori.org

Billing questions?
leslie@dhmontessori.org



PLYMOUTH-CANTON MONTESSORI SCHOOL

PCMS Summer Day Camp Registration Form

Plymouth-Canton Montessori School does not discriminate in any programs or activities on the basis of gender, race, creed, religion, color, national origin, age, sexual orientation, or disability.

General Information:

Date _____

Child's Name _____ (_____) Girl _____ Boy _____
 last first middle nickname

Date of Birth _____ Age in June 2025 _____

Parent/Guardian Name _____
 last first middle

Home Address _____
 number street city zip

Parent Cell Phone # _____ Home Phone # _____ Email _____

School child currently attends _____

Does child nap? Yes No

Program Preferences: *Please ✓ applicable program – 1 form per child.*

- | | | |
|--|--|--|
| <input type="checkbox"/> Toddler Camp | <input type="checkbox"/> Pre-K/Kindergarten | <input type="checkbox"/> Elementary |
| • Half-Day 9:00am-12:00am \$190/wk | • Half-Day 9:00am-12:00pm \$170/wk | • Half-Day 9:00am-12:00pm \$170/wk |
| • Full-Time 9:00am-4:30pm \$350/wk | • Full-Time 9:00am-4:30pm \$325/wk | • Full-Day 9:00am-4:30pm \$325/wk |

\$40 Non-Refundable Registration Fee

Please indicate (✓) weeks and times child will be attending (minimum of 3 weeks):

Wk 1 6/23-6/27	Wk 2 7/7-7/11	Wk 3 7/14-7/18	Wk 4 7/21-7/25	Wk 5 7/28-8/1	Wk 6 8/4-8/8	Wk 7 8/11-8/15	
<input type="checkbox"/> Half-Day <input type="checkbox"/> Full-Day	<input type="checkbox"/> Half-Day <input type="checkbox"/> Full-Day	<input type="checkbox"/> Half-Day <input type="checkbox"/> Full-Day	<input type="checkbox"/> Half-Day <input type="checkbox"/> Full-Day	<input type="checkbox"/> Half-Day <input type="checkbox"/> Full-Day	<input type="checkbox"/> Half-Day <input type="checkbox"/> Full-Day	<input type="checkbox"/> Half-Day <input type="checkbox"/> Full-Day	
Total \$ _____	Total \$ _____	Total \$ _____	Total \$ _____	Total \$ _____	Total \$ _____	Total \$ _____	Total +\$40 reg. = \$ _____

~ Full payment is required on or before June 23.

Payment options include checks or credit card. Invoicing through Quickbooks will be submitted via e-mail and due upon receipt. 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 _____

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, 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 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 is in good health and free from any communicable disease or illness.

SICK CHILD POLICY/HEALTH CARE POLICY

We love to see your children every day, but if they are sick, please keep them home. Our staff must stay home when they are ill as well. The Michigan Department of Health has set guidelines which we must follow:

Each week, we must report all cases of contagious diseases to the Wayne County Health Department.

We cannot accept a child for care if he or she has recently vomited or has a fever, diarrhea, or profuse nasal discharge. All are signs of infection and are contagious symptoms.

Children sent home with a fever, vomiting, and/or diarrhea may not return the next day. They must be fever-free and free from these symptoms for at least 24 hours.

We will NOT administer Tylenol or aspirin to treat a fever. This only masks the symptoms of illness and contagion.

We always have the children wash their hands before eating, preparing or serving food; after toileting, coming in from outdoors, and handling body fluids. Children also wash hands after playing in water that is shared by two or more people. We teach them how to avoid spreading germs. The children are taught correct hand-washing procedures.

Staff will wash hands upon arrival; before preparing, serving, and/or eating food; after use of the bathroom; and after each instance of handling soiled clothing, toilets, or body fluids. Adults also wash their hands before and after administering medication and after handling garbage or cleaning.

Staff and children wash with liquid or foam soap and running water for at least 20 seconds, turn off the faucet with a disposable towel, and dry their hands with a disposable towel.

Each day we disinfect tables and play surfaces several times. Surfaces or articles are washed with a solution of one tablespoon chlorine bleach in one quart of water, or a comparable product. Stuffed toys and dress-up clothes are laundered. Toys or materials that are placed in a child's mouth or otherwise contaminated are washed, sanitized, and air-dried. Carpets are vacuumed and floors are mopped daily. Where sinks are used for both food preparation and other purposes, staff clean and sanitize the sinks before using them to prepare food.

All staff wear gloves before making contact with body fluids. Gloves are discarded after each use and hands are washed. Disposable items are discarded in plastic-lined trash containers with lids. Bags are closed and discarded daily. A separate sink is specifically designated for toileting accidents, and the area is disinfected with Lysol or bleach solution.

MODEL/PUBLICITY RELEASE: I give permission for the 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.

FIELD TRIP PERMISSION/RELEASE: I give permission for the named child to participate in in-house presentations, field trips or outings with Plymouth-Canton Montessori School. Supervision will be provided by PCMS staff, parents or other volunteers. On any in-house presentation, 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.

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

DISMISSAL AGREEMENT: I acknowledge that Plymouth-Canton Montessori School will release any child to only those persons authorized on the Child Information Record. I further acknowledge agreement with PCMS's standard procedures used at the release of children in special circumstances.

I understand that PCMS personnel are not trained to make assessments relating to intoxication or other impairment and therefore assume no responsibility for any injury or harm to a child who has been released to a person listed on the Child Information Page or who is authorized by a parent, either verbally or in writing, to pick up a child. PCMS staff respect each family's privacy. However, there other questionable child release situations occur, they have a duty to maintain their role as the child's advocate.

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 care, NSF fees, administrative fee, or late pickup charges (**\$5 per minute after 4:40 p.m.**). I understand that my child may be denied admission to camp if tuition or fees are not paid in a timely manner.

STATEMENT OF UNDERSTANDING: I have read the program description, policies and information, and tuition and fee schedule of Plymouth-Canton Montessori School's summer program. I understand and agree with the philosophy and policies, and accept the conditions and terms stated therein. Plymouth-Canton Montessori School reserves the right to modify the rules and policies at its sole discretion with written notice. Such notice requirements shall not be applicable in the event of emergencies or licensing mandates.

The contract shall be interpreted in accordance with the laws of the State of Michigan.

My signature below affirms that I have read, understand and accept the terms and conditions of this contract.

Parent/Guardian Name: _____

Parent/Guardian Signature _____ Date _____

For Plymouth-Canton Montessori School _____ Date _____