



**JULY 1 -  
AUGUST 23**



**SUMMER  
ADVENTURE  
CAMP**  
**FOR BOYS & GIRLS  
3-7 YEARS OLD**

**Register by May 1st for the early bird rates!**

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- Weekly Themes
  - Sports
  - Games
  - Water play
  - Science exploration
  - Arts & Crafts
  - In-house Field Trips
  - Cooking Projects
  - Music & Movement
  - Nature exploration



# TLC Summer Camp 2024 Registration

(Ages 3 -7)

For Office Use Only:

R  P  F

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Please fill in each week/session that you would like to register your child for our summer camp. Summer camp hours are from 9 am – 3 pm or Full Day 8 am – 5 pm. If you would like to use the extended care on an hourly basis instead, please let us know.

Register by May 1<sup>st</sup> for the Early Bird Rates!

All children must be completely toilet trained to register/attend the TLC Summer Program.

<b>Week 1:</b> July 1 – 5	<b>Under the Sea</b>
<input type="checkbox"/> 9-3	<input type="checkbox"/> Full Day 8-5

<b>Week 5:</b> July 29 – August 2	<b>Nature around Us</b>
<input type="checkbox"/> 9-3	<input type="checkbox"/> Full Day 8-5

\*TLC is closed on Thursday, July 4<sup>th</sup> in observance of 4<sup>th</sup> of July.

<b>Week 2:</b> July 8 – 12	<b>Colorful World</b>
<input type="checkbox"/> 9-3	<input type="checkbox"/> Full Day 8-5

<b>Week 6:</b> August 5 – 9	<b>Time Travel</b>
<input type="checkbox"/> 9-3	<input type="checkbox"/> Full Day 8-5

<b>Week 3:</b> July 15 – 19	<b>Me &amp; My Neighborhood</b>
<input type="checkbox"/> 9-3	<input type="checkbox"/> Full Day 8-5

<b>Week 7:</b> August 12 – 16	<b>Bringing Stories to Life</b>
<input type="checkbox"/> 9-3	<input type="checkbox"/> Full Day 8-5

<b>Week 4:</b> July 22 – 26	<b>Magical Forest</b>
<input type="checkbox"/> 9-3	<input type="checkbox"/> Full Day 8-5

<b>Week 8:</b> August 19 – 23	<b>ABC's &amp; 123's</b>
<input type="checkbox"/> 9-3	<input type="checkbox"/> Full Day 8-5

<b>Session 1: July 1 – 26</b>
<input type="checkbox"/> 9-3 <input type="checkbox"/> Full Day 8-5

<b>Session 2: July 29 – August 23</b>
<input type="checkbox"/> 9-3 <input type="checkbox"/> Full Day 8-5

### TLC Summer Program Fee Schedule:

Payment in full is due at registration (please include the registration fee).

	Registered by May 1	Registered after May 1	Registration Fee
<b>Camp only</b> Weekly Rate - 9:00am-3:00pm	\$475	\$525	<ul style="list-style-type: none"> <li>▪ \$40</li> <li>▪ \$60 if two or more children</li> </ul> <b>Registration fee is nonrefundable</b>
<b>Full Day (Camp + Extended Care)</b> Weekly Rate - 8:00am-5:00pm	\$575	\$625	
<b>1<sup>st</sup> Session or 2<sup>nd</sup> Session</b> 9:00am-3:00pm	\$1800	\$2000	
<b>1<sup>st</sup> FD Session or 2<sup>nd</sup> FD Session</b> 8:00am-5:00pm	\$2150	\$2350	

**Hourly Extended Care:** \$20.00 per hour or any portion of an hour. Billing hours are 8 am - 9 am, 3 pm - 4 pm and 4 - 5 pm. If you would like to use extended care on an hourly basis, statements for hourly extended care charges will be sent home each Monday. Hourly extended care charges are due no later than the Friday after they were incurred.

The discounted session rate applies only when registering for a complete session at the time of registration. If you withdraw your registration before April 14<sup>th</sup>, half of the camp fees will be refunded, not including the nonrefundable registration fee. No refunds or credits will be given after April 14<sup>th</sup>. Camp fees are not prorated or discounted for vacations, time away, illness, holidays, or any school closures (i.e., weather, power outage, or public health emergency such as pandemic). If space permits, there is a **\$50 fee for each change** to switch weeks. The office must be notified of all changes in writing (email is fine). If you wish to add weeks or a session throughout the summer you may do so with space permitting. Payment for any additional weeks or session is due at the time they are added.

Morning drop-off is from **8:50 am - 9:00 am**. Students that arrive before 8:50 am will be charged the hourly drop-in fee of \$20.00 per hour or any portion of an hour. Afternoon pickup is from **2:50 pm - 3:00 pm**. Students picked up after 3:00 pm will be charged the hourly drop-in fee. Billing hours are 8-9 am, 3-4 pm and 4-5pm. Extended care closes at 5:00 pm. If you arrive late, a \$5.00 per minute fee will be applied to your account and will be due within 48 hours.

GENERAL INFORMATION			
Child's Name:		Birthday:	Age: Gender:
Is your child currently enrolled at TLC or enrolled for Fall 2024?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Address:		Zip:	Home Phone:
Parent/Guardian I Full Name:		Relationship to Child:	
Cell Phone:	Work Phone:	Email Address:	
Parent/Guardian II Full Name:		Relationship to Child:	
Cell Phone:	Work Phone:	Email Address:	
<b>Emergency Contact</b> (also authorized to pick up your child from TLC)		Name:	Phone Number:
<b>Allergies:</b> (Not dietary restrictions)		Medical and/or Emotional Conditions:	

LIABILITY RELEASE
<p>The undersigned has enrolled _____ to attend TLC Montessori school activities and participate in the programs offered. In consideration, the undersigned releases and discharges TLC Montessori, its officers and employees from liability of any kind to the child or the undersigned for any loss or injury to the child while participating in school or extended day program activities. The undersigned agrees that this release is intended to be as broad as permitted under the law of the State of Washington and if any part of application is found unenforceable the remainder may be enforced in full. I acknowledge the contagious nature of COVID-19 and voluntarily assume that my family and I may be exposed to or infected by COVID-19 by attending TLC Montessori.</p> <p>_____ Initial</p>
MEDIA RELEASE AGREEMENT
<p>I give permission for TLC to use photos or videos of my child _____ taken during Summer Adventure Camp or school events to be used within the school or in our newsletters and/or on our website and/or marketing (for our website and/or marketing, you will always be contacted first). You can opt out by emailing the office before your child's first day attending the summer program.</p> <p>_____ Initial</p>
CONSENT FOR EMERGENCY TREATMENT/FIELD TRIP PERMISSION
<p>I hereby give permission for my child _____ to:</p> <ul style="list-style-type: none"> <li>• Be given emergency treatment by a qualified staff member at TLC Montessori.</li> <li>• Be transported by ambulance or aid car to an emergency center for treatment.</li> <li>• Receive medical, surgical and hospital care, treatment and procedures by all licensed physicians or hospital when deemed immediately necessary or advisable by the physician to safeguard my child's health.</li> <li>• Go on field trips scheduled and supervised by TLC Montessori.</li> </ul> <p>_____ Initial</p>

By initialing each section and signing below I verify that I accept the terms in this registration.

\_\_\_\_\_  
Parent/Guardian Full Name: X \_\_\_\_\_  
Parent/Guardian Signature: \_\_\_\_\_  
Date: \_\_\_\_\_