



## 2018 Summer Program Application:

**\*Please note:** Summer enrollment is limited to 24 children per session. Enrollment will be finalized based on reception of completed application and tuition each week.

Child's Name: \_\_\_\_\_

Child's Date of Birth: \_\_\_\_\_

Is your child toilet trained?                      **Yes**    **No**

Does your child require a nap?                      **Yes**    **No**

Parents/ Guardians: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact (other than parents): \_\_\_\_\_

\_\_\_\_\_

Name/phone numbers of people approved for child pick-up:

\_\_\_\_\_

\_\_\_\_\_

### Schedules and Fees:

8:30 – 3:00    \$150/week

8:30 – 12:00    \$100/week

After camp care until 5:15    \$10/hour or \$40/week

**Week(s) attending:** Please circle week(s) for which you are enrolling.

If signing up for half days put a / through the circle. Thank you.

June 11-15                      June 18-22                      June 25-29                      July 2-6                      July 9-13

July 16-20                      July 23-27                      July 30-Aug. 3                      Aug. 6-10                      Aug. 13-17

# Emergency Release Agreement

Please Sign:

I hereby authorize the staff of Missoula Valley Montessori to act for me according to their best judgment in any emergency requiring medical attention, and I hereby waive and release the camp from any and all liability for an injury or illness incurred during the Summer Program at Missoula Valley Montessori. I have no knowledge of any physical impairment that would be affected by my child, named above, participating in the summer program.

Name: \_\_\_\_\_ Date: \_\_\_\_\_