



# *Camp Co-op*

## 2017 SUMMER CAMP REGISTRATION

This summer we will be offering two sessions of summer camp. Each session will last six days. No parent participation is required. Children must be between the ages of 3 years (unless currently enrolled in the Toddler Program) and 2017 kindergarten graduates. Co-op families will have priority enrollment until **April 7, 2017**. Class size is limited to 20 children, so sign-up today! In the event more people sign up than space allows, we will hold a lottery for the available spaces. After **April 7, 2017**, registration is first come, first serve.

**Session I:** June 20, 21, 22 and June 27, 28, 29 (Tuesday, Wednesday, and Thursday)

**Session II:** July 11, 12, 13 and July 18, 19, 20 (Tuesday, Wednesday, and Thursday)

**Time:** 9:30am – 12:30pm. A hearty, self-prepared snack will be provided.

**Wear:** Play clothes and sunscreen. Dress in layers for comfort in changing weather.

**Bring:** A change of clothes, clearly marked in a Ziploc bag. Swimsuit is optional for water play.

**What:** Play is the priority at Co-op Summer Camp. Children arrive to and depart from camp in the play yard at the Co-op. They will spend their time swinging, singing, playing with friends, making friends, arts and crafts and preparing their own snack. Tricycles, water play and stories are also part of the fun.

**Cost:** **\$245.00** for each session due with registration. If you withdraw from the program before **May 15, 2017** your **\$245.00** is fully refundable. After **May 15, 2017** only **\$125.00** will be returned to you.

**Paperwork Required:** Complete and up to date paperwork is required. You will be informed of what is needed if it's not in the Co-op's files already. Placements will be posted at the Co-op in mid-April.

*– Please cut here –*

\_\_\_\_\_  
CHILD'S NAME

\_\_\_\_\_  
BIRTH DATE

\_\_\_\_\_  
PARENT'S NAME

\_\_\_\_\_  
HOME PHONE NUMBER

\_\_\_\_\_  
PARENT'S CELL NUMBER

\_\_\_\_\_  
E-MAIL

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
CITY | STATE | ZIP

*Please prioritize your choices (write down 1<sup>st</sup> and 2<sup>nd</sup> choices):*

[ ] Session I

[ ] Session II

[ ] I wish to be contacted if space becomes available in an additional session.

Before any child is enrolled in two sessions, everyone interested will be given a chance to enroll in one session. Please enclose your check for **\$245.00** and return to the envelope in the parent box in the cubby room. If you request and receive enrollment in more than one session, you will be notified and will then need to pay the additional **\$245.00** to secure your child's spot in the additional session. Questions please call the school, 707-963-7212.

**ST. HELENA COOPERATIVE NURSERY SCHOOL**  
P.O. Box 493 | Rutherford, CA 94573 | www.sthelenacoop.org | 707-963-7212 PHONE