



2021 Summer Camp

(June 21st – September 3rd, 2021)

Why change camps week to week when your kids can experience plenty of fun and educational activities from a single camp? Western Heights Montessori Academy's Summer Camp takes the hassle away from summer time planning! We offer a program that is exciting, educational and fun!

Our Summer Camp is also:

- **Flexible:** Available for kids between 3 and 6 years of age
- **Convenient:** A 11-week-long camp that covers all the summer weeks you need when school is out
- **Low Teacher to Student Ratio:** 1:8 or lower teacher to student ratio is observed
- **Comprehensive:** Fun and educational topics every week
- **Fun:** Spacious and fun playground, perfect for outdoor play and fun in the sun.
- **Enriching:** A mix of Montessori curriculum and themed events. Educational special events and field trips* planned!
- **Healthy:** One nutritious hot lunch and two snacks included so that you don't have to worry about packing lunch boxes!

Camp Hours & Fees (Please select your preferred enrollment option below):

| | |
|--|---|
| Full-Day: 8:45am – 3:45pm Five-day week: \$300/week Four-day week**: \$260/week | Before School: 7:00am – 8:45am (\$10/week) |
| | After School: 4:00pm – 6:00pm (\$20/week) |

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|---|--|---|
| <input type="checkbox"/> Week 1: Great Outdoors | <input type="checkbox"/> Week 2: Movin and Groovin** | <input type="checkbox"/> Week 3: Backyard Palooza |
| <input type="checkbox"/> Week 4: Sports World | <input type="checkbox"/> Week 5: International Travelers | <input type="checkbox"/> Week 6: Under the Sea |
| <input type="checkbox"/> Week 7: Fairy Tales and Heroes** | <input type="checkbox"/> Week 8: All About Me | <input type="checkbox"/> Week 9: Wild N' Wacky |
| <input type="checkbox"/> Week 10: Insects and Reptiles | <input type="checkbox"/> Week 11: My Dream Job | |

Payment Options:

- Cheque: Please make cheque payable to **Western Heights Montessori Academy**.
- Etransfer: Please send total camp fee to millcreek@westernheightsmontessori.com with your child's full name and weeks you are registering in the note.
- Subsidy payment: I have subsidy agreement with the region. My parent contribution is \$_____ / day. I have informed my case worker that I will be at the Play and Learn Children's Centre March Break Camp

How to Register:

Please complete the registration forms and return them either in person or via email at millcreek@westernheightsmontessori.com with total camp fee payment to secure your spot. Register today as space fills up quickly!

Cancellation Policy:

Four weeks' notice is required for changes or cancellations. Note that changes or cancellations cannot be made **after May 21st**. Refunds will not be provided if less than four weeks' cancellation notice is received.

- Week 1: June 21- 25:** **Great Outdoors**
Adventures always begin with fun in the great outdoors. During this week, the children will be discovering and exploring nature through an exciting treasure hunt, pitching a tent outside for snack time, making s'mores, and more...
- Week 2: June 28 – July 2:** ****Moovin and Groovin (4-day week)**
Have you ever wanted to learn how to line-dance or disco? We will explore different kinds of music and dances from all over the world! We will also create our own dance costumes and finish up the week with a dress up dance party.
- Week 3: July 5 - 9:** **Backyard Palooza**
Enjoy a week of exploration and discovery as we learn about the different animals we find on the farm, understand how crops grow, explore the equipment farmers use, go through a corn maze, and discover how bees make honey! **Field Trip to Andrews Scenic Farm*!**
- Week 4: July 12 - 16:** **Sports World**
"One Spirit, One Team". This week we will have fun playing a variety of sports games, challenging other classroom teams, and being creative by making our own jerseys and medallions. **Special guests from Royal Astronomical Society of Canada.**
- Week 5: July 19 - 23:** **International Travelers**
Attention all passengers, it's time to pack your bags, print your boarding passes and bring along your passports! We will be exploring the different cultures that make up our wonderful and diverse world! We will create our very own passports and stamps and make a few meals from around the world.
- Week 6: July 26 - 30:** **Under the Sea**
Let's take a dive and explore all of the mysterious creatures we find in the ocean! Join us as we go deep sea fishing, create a 3D shark mask and study life in the sea. **Field trip to Crock A Doodle Art Studio*.**
- Week 7: August 3 - 6:** ****Fairy Tales and Heroes (4-day week)**
Join us as we reenact our favorite fairy tales and famous heroes! We will be exploring magic spells and potions, create magic mirrors and dragons and play lots of games!
- Week 8: August 9 - 13:** **All About Me**
From head to toe, learn about our different senses and more. Come join us this week as we explore how many bones we have in our body, how our hair grows, and how each fingerprint of ours is unique. We will discover through science and art the interesting parts of our bodies including our heart, our muscles and brain!
- Week 9: August 16 - 20:** **Wild and Wacky**
Imagine wacky hair day, backwards day, opposite day and much more MAD CRAZINESS! Create our own wacky monsters and hair styles. Learn about what wild and weird things people eat.
- Week 10: August 23 – 27:** **Insects and Reptiles**
Creep and crawl into this week's theme as we get messy making worms in dirt. Let's catch some insects with our nets and get interactive with real life reptiles.
- Week 11: August 30 – Sept 3:** **My Dream Job**
What do you like to be when you grow up? A Construction worker, Police officer, Nurse, Dentist, Fire fighter – or something else? Let's have fun learning about these different careers and try to imagine what it would be like to walk a day in their shoes. **Special Visitor: Fire fighters**

**Additional field trip fees apply.*

WESTERN HEIGHTS MONTESSORI ACADEMY
Summer Camp Application for Admission

Childs' Surname_____ Given Name (s)_____

Date Of Birth (MM/DD/YYYY)_____ Gender Male_____ Female_____

Home Address_____

Province_____ Postal Code_____ Primary Contact #:_____

Mothers Name:_____ Father's Name:_____

Address:_____ Address_____

Home #:_____ Home #:_____

Cell #:_____ Cell #:_____

Work #:_____ Work #:_____

Email:_____ Email:_____

Mother's Work Address:_____ Father's Work Address:_____

EMERGENCY CONTACTS

Contact #1: _____ Contact #2: _____

Relationship: _____ Relationship: _____

Telephone: _____ Telephone: _____

In case of a medical emergency when prompt medical attention is deemed necessary, if the parents or guardians or the emergency contact person cannot be immediately reached, permission is hereby granted to move, (Child's Name): _____ to the nearest medical facility and to proceed with treatment.

Any medical expenses incurred for such treatment shall be my responsibility.

Father or Guardian Signature_____ Date_____

Mother or Guardian Signature_____ Date_____

WESTERN HEIGHTS MONTESSORI ACADEMY
MEDICAL INFORMATION

Child's Full Name: _____ Gender: _____

Date of Birth (MM/DD/YYYY): _____ Height: _____ cm Weight: _____ Kg

Health Card #: _____

Child's General Health (Comment): _____

Please outline any athletic and/or school activities in which your child can **NOT** participate: _____

Has your child ever had his/her eyes tested: _____ Result: _____

Has your child ever had his/her hearing tested: _____ Result: _____

Does your child suffer from any allergies/food sensitivities (Yes/No): _____ If so, please list _____

Are your child's allergies severe enough to be considered anaphylactic (Yes/No)? _____

Must your child keep any medication at school for any medical condition (Describe):

Name Of Child's Physician: _____ Phone: _____

Address: _____

Alternate individual to be called in any emergency when parents/guardians cannot be reached:

Name: _____ Relationship: _____

Business Phone: _____ Mobile: _____

Primary Contact #: _____

Address: _____

Western Heights Montessori Academy

Summer Camp 2021

Risk & Waiver Agreement

Permission for Western Heights Montessori Academy to Seek Medical Attention

I, the undersigned, hereby authorize Western Heights Montessori Academy, its employees, or agents, to seek necessary medical aid that maybe required as a result of any accident or injury sustained by my child.

Element of Risk Notice

The risk of injury exists in every athletic activity. Falls, collisions and other incidents may occur and cause injury. Due to the very nature of athletic activities and outdoor pay, injuries may range from minor sprains and strains to more serious injuries affecting the head, neck or back. Some injuries may lead to paralysis or prove to be life threatening. These injuries result from the nature of athletic activities and can occur without any fault on either the part of the student, Western Heights Montessori Academy, or its employees/agents. By choosing to participate in outdoor play/athletic activity you are assuming the risk of an injury occurring. The chances of an injury occurring can be reduced by carefully following instructions at all times while engaged in an athletic activity. Western Heights Montessori Academy attempts to manage as effectively as possible the risk for students while participating in sports/athletics/outdoor play.

I, the undersigned, agree that Western Heights Montessori Academy, its employees, or agents shall not be liable for any accident or injury sustained by my child(ren) or for any loss or damage to personal property arising from, or in any way resulting from, participation in the program.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

Contact Number: _____

Photo Permission and Release:

I give Western Heights Montessori Academy permission to photograph and/or video materials. These photographs/videos may be used by Western Heights Montessori for marketing and promotional materials in, but not limited to Western Heights Montessori Academy publications, advertisements, and/or posted on websites and social media handles. Names will not be identified with images at all times.

Parent/Guardian Signature: _____

Date: _____