The Edison Early Learning Center School Aged Summer Camp

Program Application

CHOOSE YOUR SESSIONS Students choosing at least 8 weeks will receive priority over others. 1. Check off weeks/themes in which you are registering..

Campers Name:								
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Grade Currently Attending: PK4 K 1

√ week(s)		Campers Will	TTH		
	Week 1 (June 17-21) Myth Busters	 Bust or confirm many urban legends and science tricks Try to walk on a carton of eggs See if paper can truly be waterproof Explode a watermelon Perform other crazy experiments 	Program Hours: 8:30am-2:30pm		
	Week 2 (June 24-28) Mad Scientist	 Perform some crazy science experiments Make Invisible Ink & Giant Bubbles Explore carbon with Dancing Raisins Have fun with some dry ice experiments! 	Program Hours: 8:30am-2:30pm		
	Week 3 (July 2, 4 closed) Artiful Antics	 Use many tools and mediums to explore daily art activities Use natural materials to create a masterpiece. Use magazines to create a collages that represent themselves Create custom portrait silhouette 	Program Hours: 8:30am-2:30pm		
	Week 4 (July 8-12) Minute To Win It!	 Have a blast competing 1 minute challenge Build teamwork skills Use creative thinking Work on problem-solving skills 	Program Hours: 8:30am-2:30pm		
	Week 5 (July 15-19) Ooey Gooey Week!	 Make Oobleck and slime Perform Plunger Painting & Pendulum Painting Fly Swatter Painting Make Borax Bouncy Balls and Exploding Milk Tap into your sensory skills with some messy art!! 	Program Hours: 8:30am-2:30pm		
	Week 6 (July 22-26)	Create an Edible BrainBuild an articulated hand	Program Hours: 8:30am-2:30pm		

The Ins & Outs of You! Human Body & Other Animals	 Explore how other animals bodies work compared to humans Visit the Scranton Aquarium (additional fee) 	
Week 7 (July 29-2) Having The Slime of My Life!	 Create a new SLIME each day Build some cool contraptions & make their own invention Explore many STEM challenges 	Program Hours: 8:30am-2:30pm
Week 8 (August 5-9) Music Makers	 Create their own version of "STOMP" Design and build homemade instruments Experience a variety of instruments Explore a variety of music genres and critique each Participate in a glow in the dark dance party. 	Program Hours: 8:30am-2:30pm
Week 9 (August 12-16) MACH 1 (Multi-Adventure Challenge)	 Try new sports such as balloon archery Brainstorm and build their own obstacle course Participate in orienteering workshop to learn how to use a compass and maps Go on an outdoor scavenger hunt Field Trip: Kalahari Ropes Course (additional fee) 	Program Hours: 8:30am-2:30pm
	Payment: 1) Please send in the \$35 registration fee with this form to hold your child's spot. 2) Add up # of weeks and multiply by weekly rate. 3) Half of total payment due by June 15, 2019 4) Second half of payment is due by July 15, 2019 • Make checks or money order payable to: The Edison Early Learning Center • Child Care Works Funding Accepted • Cash payments may be made in person. • No refunds will be issued after June 15	Program Hours # of weeks x \$68= Total Tuition *If attending week 3, subtract one day (\$34) for July 4th closure

The Edison Early Learning Center

1. CAMPER AND PRIMARY CONTACT INFORMATION

Name of Student:		Date of Birt	h:
Gender: M F Age(at the time	e of Camp):	_ Grade currently Attending:	PK4 K 1
Name of School:			
T-Shirt Size (circle one): You	th: XS SM MED LG or A	Adult: SM MED LG XL XXL XXXL	(free with registration)
Name of Parent(s)/Guardian	/Primary Contact:		
Mailing Address:			-
City:	State:	Zip Code:	_
Home Phone:	Cell Phone:	Work Phone	Email address you check
frequently:			
Best way to contact you? (cir	cle one) Home Phone	e Cell Phone Work Phone	Email
Please send my confirmation	paperwork via M	ail Email (all schedules wi	ll be confirmed by May 1, 2018)
Insurance Company and num	ıber:	Preferred Hospital	l:
Students Physician:			
Address:	Phone #:		
I give permission to the staff	of The Edison Early L	earning Center to give first aid	as needed to my child in the event of an emergency.
(sign	& date)		
2. EMERGENCY CONTAC	TS (please provide	two contacts other than par	rents)
First Contact's Name:		Relations	hip:
Home Phone:	Work/	Cell Phone:	ext
Second Contact's Name:		Relationship	D:
Home Phone:	Work	k/Cell Phone:	ext

4. SAFETY INFORMATION

Please list all known conditions so we can accommodate your camper's needs.

 $\label{thm:conditions} Does \ your \ camper \ have \ any \ medical \ conditions, \ allergies, \ or \ special \ needs \ the \ staff \ should \ know \ about?$

Has your child previously attended Edison for any other programs?

*please note that behavior problems will not be tolerated at our camp. Students causing disruptions to the learning process will be asked to leave camp without refund of days attended.

Call Ms. Dawn Toolan (owner/director) with any questions or special concerns

570-282-5370

Email: edisonearlylearningcenter@gmail.com

Mail completed form with \$35 registration fee to:

Edison ELC

Summer Camp

227 Pike St.

Carbondale, PA 18407