



Fall Break 2018

'Aikahi Elementary School

October 8th - October 12th, 2018

Activities Include

Field Trip: Pumpkin Patch

Sports, Cooking, Games, Crafts,
Water Play, and More!!!



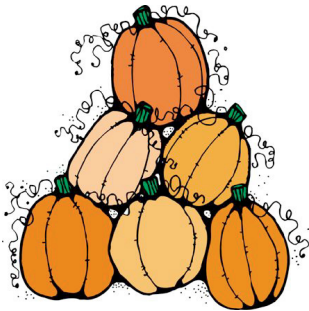
Program Fees

Full Program - \$155

Daily Rate - \$35 per day

Program Hours

Daily (7 am - 6 pm)



Students should bring lunch and snacks (morning & afternoon) and must be able to participate safely in a 1:20 staff to student ratio.



How to Register

All participants must have a registration form on file (a new one must be completed annually). If you are new to *DREAM Co.'s Holiday Programs*, you may pick-up a registration form (one per child) from our A+ Office in the Aikahi School Cafe (open afterschool until 5:30 pm). This form is different from the A+ form required by the state. Registration forms can also be downloaded from our website.

Participants must be paid and registered prior to the Registration Deadline in order to ensure a space with the program. Registration received after the due date will be assessed a \$10 late fee per order and will be accepted on a space available basis.

Complete and send payment coupon (below), registration form, and payment to *DREAM Co.* on or before the due date. Payment may also be made online at dreamcohawaii.org. Forms and payments may also be dropped off at the Aikahi A+ Office in the school's cafe.

Please make checks payable to:

DREAM Co.
P.O. Box 565
Kailua, HI 96734

<http://dreamcohawaii.org>

Phone: 263-3663 Toll Free Fax: 1-866-583-0212

REGISTRATION DEADLINE

September 28, 2018

Fall Break 2018

'Aikahi Elementary School
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REGISTRATION DEADLINE

September 28, 2018

I would like to register my child(ren) for DREAM Co.'s Fall Break Program

_____	_____	_____	_____
Child's Name	Grade	Child's Name	Grade
_____	_____	_____	_____
Child's Name	Grade	Child's Name	Grade

DAILY RATES (\$35 per day)

Please check all days your child will be attending. Participants requesting daily rates will be accepted on a space available basis after September 28, 2018.

Oct. 8 (Mon) Oct. 9 (Tue) Oct. 10 (Wed) Oct. 11 (Ths) Oct. 12 (Fri)

FULL PROGRAM

Full Program - \$155 (Accepted on a space available bases after September 28, 2018)



P.O. Box 565 + Kailua, Hawaii 96734
Ph: 263-3663 + Toll Free Fax: 1 (866) 583-0212
<http://dreamcohawaii.org>

Payment Options: (Please check one)

Check/M.O. Cash (Do not mail cash) Visa/MC

I authorize DREAM Co. to bill the card listed below as specified:	
Amount: \$ _____	Be sure to include \$10 late fee if registration is placed after Registration Deadline. Otherwise your registration will not be accepted.
Credit card type: _____	Exp. Date: _____
Card Number: _____	CSV 3 Digit Code: _____
Name: (as it appears on card)	Zip Code: (of your billing address)
Signature: _____	Date: _____

DREAM Co. Refund Policy

Withdrawl TEN (10) days prior to the first day of program 100%
Withdrawl FIVE (5) days prior to the first day of program..... 50%
Withdrawl thereafter NO REFUND