

Institute Day

February 13, 2026



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.

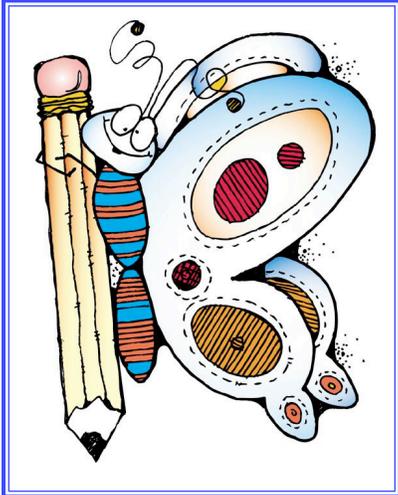
Participants must be paid and registered prior to the Registration Deadline in order to ensure a space with the program. Registration received after the due date will be assessed a \$10 late fee per order and will be accepted on a space available basis.

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.

DREAM Co.
 P.O. Box 1652
 Kaneohe, HI 96744
<http://dreamcohawaii.org>

Phone: 420-1995 Toll Free Fax: 1-866-583-0212

'Aikahi Elementary School



Activities Include

Sports
 Games
 Crafts
 and More!!!

Program Fees

\$40 per day

Program Hours

7 am - 5:30 pm
 Daily

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

REGISTRATION DEADLINE

February 12, 2026

Teacher Institute Day 2026

Aikahi Elementary School
 February 13, 2026

REGISTRATION DEADLINE

February 12, 2026

I would like to register my child(ren) for DREAM Co.'s Teacher Institute Day Program

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

DAILY RATES (\$40 per day)

Please check all days your child will be attending. Participants requesting registration will be accepted on a space available basis after the payment deadline.

February 13



P.O. Box 1652 + Kaneohe, Hawaii 96744
 Ph: 808-420-1995 + Toll Free Fax: 1 (866) 583-0212
<http://dreamcohawaii.org>

Payment Options: (Please check one)

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

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