



Children ages three to nine years old are invited to a sensational summer academy!
Our 2016 summer academy will be led by Charlotte Academy's Montessori team staff members. Each week features a theme for their education and enjoyment!

Sign up now!

One-time registration fee per child: \$ 25.00

- Weekly tuition Half Day: (8:00am—11:45am/no lunch)
\$85.00 / \$75.00 2nd sibling discount / \$70.00 3rd Sibling discount
- Weekly tuition Full Day: (8:00am-3:00 pm)
\$150.00 / \$135.00 2nd sibling discount/ \$125.00 3rd sibling discount
- Registration begins April 18th; sign up in the front office at Charlotte Academy.
- Full registration and first week tuition due with enrollment.
- Spaces are limited, registration is first-come, first-serve basis.

Week 1: June 20-24	Mad Science
Week 2: June 27- July 1	Dino-Mite (Dinosaur Week)
Week 3: July 5-8	Team USA / Olympic Games
Week 4: July 11-15	International Iron Chef's Week
Week 5: July 18-22	Out of this World (Solar System)
Week 6: July 25-29	Iron Chef's Cooking Week



- Children bring their own snack, lunch and drink each day.
- Please provide an extra set of clothes including shirt, shorts, undergarments, and socks in a labeled plastic bag.
- All children should come with a water bottle each day.



Charlotte Academy Summer Program Registration 2016

_____ Week 1: June 20 -24	_____ Week 4: July 11 - 15
_____ Week 2: June 27-July 1	_____ Week 5: July 18 - 22
_____ Week 3: July 5 - 8	_____ Week 6: July 25 - 29

One-time registration fee per child: \$ 25.00

Weekly tuition Half Day: (8:00am—11:45am no lunch) \$85/\$75/\$70

Weekly tuition Full Day: (8:00am—3:00pm) \$150/\$135/\$125

Child(ren)'s Name(s):	Age	Half or Full Day
_____	_____	_____
_____	_____	_____
_____	_____	_____

WEEKS TO ATTEND—FULL PAYMENT DUE AT REGISTRATION

One-time Registration Fee: \$25 x _____ Children = \$ _____

Total Weekly Tuition: Half Day x _____ Weeks = \$ _____

Full Day x _____ Weeks = \$ _____

Total Payment = \$ _____

Payment made be via ACH, or check payable to Charlotte Academy

2016
REGISTRATION CONTINUED

Child's Name	Age	Date of Birth
--------------	-----	---------------

Child's Name	Age	Date of Birth
--------------	-----	---------------

Child's Name	Age	Date of Birth
--------------	-----	---------------

Child(ren) reside(s) with: _____ Both Parents _____ Mother _____ Father

Other: (Please Specify) _____

Mother's/Guardians Name	Contact Phone #
-------------------------	-----------------

Address _____

Father's/Guardians Name	Contact Phone #
-------------------------	-----------------

Address _____

Other persons authorized to pick up my child:

Name	Relationship	Contact Phone #
------	--------------	-----------------

Name	Relationship	Contact Phone #
------	--------------	-----------------

Allergies: _____

Medical Conditions: _____

Other: _____

Emergency Contact: _____ Permission to Treat: _____

Dr. Name & Phone #: _____

Hospital Preference: _____

I understand that my child must be picked up from Charlotte Academy Summer Program each day by 11:45 am (half day) or 3:00 pm (full day).

Parent/Guardians Signature

Date