



little owl enrichment

where curious minds grow

summer camp 2017

camp week selections

*Please check off each week selected or select our unlimited option.
If choosing specific weeks add your total by using our weekly rates noted. Thank you!*

Kindergarten through 5th grade

week 1 7/5-7/7	week 2: 7/10-7/14	week 3: 7/17-7/21	week 4: 7/24-7/28	week 5: 7/31-8/3	Unlimited \$720	Total weeks (\$160/wk)	Total Due

Monday -Friday 3 pm - 5:30 pm

Where did this sport come from?! Children explore the history of various sports and discover the why's and how's of their rules, while also learning to play and promote good sportsmanship!

Watercolor Wisdom- Master's level instructors visit one day a week to learn the principles of watercolor painting!

Lego Robos- Children explore the world of Lego Education! Both free building and structured robot building and coding opportunities are offered to expand your child's imagination and understanding of coding!

Bio Busterz- Join us in a weekly science class touching on various areas of study including, biology, chemistry, entomology and MORE! Please note, walks and sessions in the local Cranbury Preserve are standard!!

Gametime Gurus- children engage in classic games while also building their own unique game to take home!



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student information

Name _____ Birthdate _____

Street address _____ Zip _____

City, State _____ Home phone _____

School _____ Grade _____

Email address _____

Mother's Name _____ Home Phone _____

Street address _____ Cell Phone _____

City, State _____ Zip _____

Does this parent have custody of student and is authorized for pick up? yes no

If answered "no", please provide documentation with custody stipulations to administration with enrollment.

Father's Name _____ Home Phone _____

Street address _____ Cell Phone _____

City, State _____ Zip _____

Does this parent have custody of student and is authorized for pick up? yes no

If answered "no", please provide documentation with custody stipulations to administration with enrollment.

****ALLERGIES & MEDICAL CONDITIONS** _____



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2017

Emergency contacts

Name _____ Relation _____

Street address _____ Home phone _____

City, State _____ Cell Phone _____

Name _____ Relation _____

Street address _____ Home phone _____

City, State _____ Cell Phone _____

Insurance Information

Insurance Provider _____ Phone Number _____

Policy Holder _____ Relation _____

Policy Number _____

I authorize Little Owl Enrichment to seek immediate medical attention for my child in the case of an emergency.

yes

no

If answered "no", please provide detailed notarized instructions in writing to administration upon enrollment.



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Summer Billing Policy 2017

Thank you for choosing Little Owl Enrichment. Payment in full and a one time \$25 registration fee per family is required to complete your registration and ensure your child(ren)'s enrollment in our 2017 Summer Enrichment Program. A 10% sibling discount is available. *Further promotions are not accepted during our Summer Program.* Your payment is 100% refundable if canceled by June 1st. All cancellations after June 1st are nonrefundable. Make-ups and class credits are not possible during our summer program. *An absence from the program is a forfeiture of the class that day.* Upon completion of your registration and payment you will promptly receive a confirmation. Please do not hesitate in contacting our office with any further questions/concerns 609.395.0941 or enroll@littleowlenrichment.com

Name on card

Card number

Sec code

Street address

Zip code

City, state

Exp. date

I hereby authorize, Little Owl Enrichment LLC to charge the above detailed card

in the amount of \$_____ for educational services I have selected to be provided for my child(ren).

signature

date



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Safety Policy 2017-2018

Thank you for choosing Little Owl Enrichment for the promotion of your child's literacy, analytical thinking and social growth. Please understand that our programs do not involve any unusual physical activities that would provide any more of a risk to your child than a walk in town or playing in their back yard. Typical childhood accidents like skinned knees and bumps can occur through play. Your child(ren)'s safety is our priority and we work to ensure that they have fun while also protecting their well-being. However, occasional skinned knees can happen!

I _____ the parent / guardian of _____ do hereby consent to allow my child to participate in the Little Owl Enrichment programs sponsored by Little Owl Enrichment LLC. I certify that s/he is in proper physical condition for safe participation. I understand and recognize that there is a risk of injury by participation in this or any program. I agree to indemnify and hold harmless Little Owl Enrichment, Little Owl Enrichment LLC, their agents and employees from any injuries my child may sustain by participating.

parent/guardian signature

date



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I certify that the information above is accurate. I authorize Little Owl Enrichment, its instructors, employees, and contractors, to use the information or records specified above in an educational setting to provide differentiated services to my child. I understand this may include and is not limited to reports, evaluations, and notes of any kind, contained in any record keeping system maintained by or on behalf of Little Owl Enrichment; that Little Owl Enrichment retains the discretion to decide if particular records or information are within the scope of this Waiver. I agree to release and hold harmless Little Owl Enrichment, its components, offices, employees, contractors, agents, and assignees, from any and all claims of action or damages of any kind arising from, or in any way connected to, the release or use of any information or records pursuant to this Waiver.

Parent/guardian signature

date

Printed name



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2017-2018

student questionnaire

1. What are your child's strengths?

2. What are your child's weaknesses?

3. What are your child's interests?

4. Does your child have siblings?

5. What is your child's primary language?

6. Are any languages other than English spoken within the home?

7. Has your child ever been diagnosed with a learning disability? If so, please explain in detail.

8. Has your child ever been diagnosed with any neurological and/or psychological disorder? If so, please explain.

If questions 7 and/or 8 were answered yes...

a. Is your child verbal?

b. Does your child have any physical disabilities related to diagnosis? If so, please explain.

c. Does your child have triggers? If so, explain.

d. Does your child have dietary restrictions related to his/her diagnosis?

e. Are gross and/or fine motor skills affected by your child's diagnosis?

f. Does your child receive any of the following services... CIRCLE YES OR NO

Y/N -Occupational therapy

Y/N -Speech therapy

Y/N -Physical therapy

Y/N -Psychological therapy

9. Has your child ever exhibited any violent tendencies towards classmates, teachers, therapists etc.?

10. Does your child have any allergies to food or medication? If so, please explain.

11. What are your goals for your child during his/her time at Little Owl?