

Camp Discovery Registration

8938 33RD ST., PRINCETON, MN

Child's Name: _____ Birthdate: _____

Boy Girl

Grade in Fall of 2026: _____ Home Phone: _____

Home Address: _____ City/Zip: _____

Parent (Guardian) 1 Name : _____ Cell: _____ Text
ability: Yes No

Work Phone : _____ Email: _____

Parent (Guardian) 2 Name : _____ Cell: _____ Text
ability: Yes No

Work Phone : _____ Email: _____

CAMP HOURS: 9:00AM – 2:30PM | **BEFORE CARE:** 7:00 - 9:00AM | **AFTER CARE:** 2:30 - 5:45PM

PRESCHOOL/ KINDERGARTEN CAMP RATES : 3 Full Days - \$115 5 Full Days - \$135

PRESCHOOL CAMP RATES POTTY TRAINING: 3 Full Days - \$125 5 Full Days - \$155

SCHOOL AGE CAMP RATES (GRADES 1-5) : 3 Full Days - \$115 5 Full Days - \$135

CARE RATES: Before Care \$25.00 per week After Care 2:30 – 3:30PM \$50 per week

After Care 2:30 – 5:45PM \$80 per week

Select AM Drop-Off Time: 7:00 7:30 8:00 8:30 9:00

Select PM Pick-Up Time: 2:30 3:00 3:30 4:00 4:30 4:45 5:00 5:30 5:45

*Start date may change due to snow days and possible school days added

*NOTE the first and last week have shorter attendance days

WEEKLY THEMES

June 3-4-5 Welcome Week*

June 8-12 Garden Week

June 15-19 Friendship Week

June 22-26 USA Stars and Stripes Week

*** **CAMP CLOSED: June 29 - July3** ***

July 6-10 Art Camp Week

July 13-17 Under the Sea Week

July 20-24 Camping Week

July 27-31 Safari Week

Aug 3-7 Out of the World Space Week

Aug 10-14 Fitness Week

Aug 17-18-19 Goodbye Week

NO CAMP: Teacher Prep Days August 20,21,24,25,26
Open House for New School Year: August 27th

Camp Discovery Registration, continued

Child's Name: _____

Birthdate: _____

SUMMER TUITION COMMITMENT POLICY: In addition to the agreement on the Discovery Montessori Academy Tuition Contract, I commit to payments for the **entire** summer camp program regardless of change in my plans to attend based on summer vacation.

X _____
PARENT/GUARDIAN SIGNATURE

Date: _____

If you circle "no" please provide an alternative product or contact the director for alternative activity plan.

MEDICATIONS: The school will provide the following products:

- I give staff permission to apply:
- Equate Sunscreen-Kids SPF 50
 - Sunscreen lotion (NOT SPRAY or AREOSOL) daily as prescribed on packaging
 - No- I will provide an alternative (NOT SPRAY or AREOSOL)

X _____
PARENT/GUARDIAN SIGNATURE

Date: _____

- I give staff permission to apply:
- Off Family Care Insect Repellent
 - Insect repellent daily as prescribed on packaging
 - No- I will provide an alternative

X _____

Date: _____

TICK POLICY: Our staff are prohibited from removing ticks from children. If your child has a tick, you will be called for the tick removal and if needed the child may have an early release.

X _____
PARENT/GUARDIAN SIGNATURE

Date: _____

OFFICE USE ONLY: \$30 Deposit Made to Discovery Montessori Academy Check #: _____
Date Received: _____ Time: _____ Cash Amount: _____

