



# MINDTECH MONTESSORI SCHOOLS

REG. # \_\_\_\_\_

I WOULD LIKE TO REGISTER FOR  
(PLEASE CHECK  ONE BOX) **NORTH CAMPUS**  
1 Dickson Hill Road, Markham, ON. **EAST CAMPUS**  
8961 9th Line, Markham, ON.**HOLIDAY NOTICES/SCHOOL CLOSURES: WE ARE CLOSED ON THE FOLLOWING DAYS:**

• FRI, JUNE 29, 2018

(P.D Day)

• MON, AUGUST 6, 2018

(Civic Holiday)

• MON, JULY 2, 2018

(Canada Day Holiday)

• FRI, AUGUST 3, 2018

(P.D Day)

**Please note that NO UNIFORMS are required of children during Summer Camp**CHILD'S NAME: \_\_\_\_\_  
FIRST LASTDOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MONTH DAY YEARADDRESS: \_\_\_\_\_  
NO.# STREET CITY POSTAL CODEPARENT(S)  
EMAIL: \_\_\_\_\_MOTHER NAME: \_\_\_\_\_  
FIRST LAST

HOME PHONE: \_\_\_\_\_ OFFICE/CELL: \_\_\_\_\_

FATHER NAME: \_\_\_\_\_  
FIRST LAST

HOME PHONE: \_\_\_\_\_ OFFICE/CELL: \_\_\_\_\_

**SCHOOL HOURS: 7:30 AM - 6:00 PM**

Expected Hours of Arrival: \_\_\_\_\_ : \_\_\_\_\_ Departure \_\_\_\_\_ : \_\_\_\_\_ Gender: M / F

<b>CURRENT GRADE LEVEL</b>	<input type="checkbox"/> Jr. CASA
	<input type="checkbox"/> Sr. CASA
	<input type="checkbox"/> Elementary

\* \* Please check off  the weeks you would like to register in the full time column OR circle which 3 part time days your child will attend as per your chosen weeks and indicate yes or no for meal plan in either case.

DATE	WEEKLY THEMES	FULL TIME <input checked="" type="checkbox"/> 7:30am – 6:00 p.m. Before May 1, 2018 - \$205 (Per week) After May 2, 2018 - \$225 (Per week)	PART TIME (Select which 3 FULL DAYS** 7:30a.m. – 6:00 p.m) Before May 1, 2018 - \$155 (Per week) After May 2, 2018 - \$165 (Per week)	MEAL PLAN YES / NO	FEE TOTAL (Include meals)
<b>FOR CURRENT MINDTECH FAMILIES: *Early Bird fee expires May 1, 2018. Summer Camp is operated on a limited enrolment* (Please check <input checked="" type="checkbox"/> all that apply.)</b>					
<b>*DENOTES A 4 DAY WEEK</b>		<b>\$225 after May 1, 2018</b> \$205.00 EARLY BIRD	<b>\$165 after May 1, 2018</b> \$155.00 EARLY BIRD		
June 25 – 29*	All About Me	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	M T W TH	YES / NO \$ _____
July 2 - July 6*	Jurassic Island	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	T W TH F	YES / NO \$ _____
July 9 – July 13	Pirates of MindTech!	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	M T W TH F	YES / NO \$ _____
July 16 – July 20	Spectacular Sports	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	M T W TH F	YES / NO \$ _____
July 23 – July 27	Where the Wild Things are	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	M T W TH F	YES / NO \$ _____
July 30 – Aug 3*	Destination: Asia	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	M T W TH	YES / NO \$ _____
Aug 6 – Aug 10*	To Infinity and Beyond!	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	T W TH F	YES / NO \$ _____
Aug 13 – Aug 17	Campers of the Caribbean	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	M T W TH F	YES / NO \$ _____
Aug 20 – Aug 24	Tropical Paradise	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	M T W TH F	YES / NO \$ _____
Aug 27 - Aug 31	Under the Sea	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	M T W TH F	YES / NO \$ _____
<b>PAYMENT INFORMATION <input checked="" type="checkbox"/></b> <input type="checkbox"/> CHEQUE <input type="checkbox"/> CASH <input type="checkbox"/> FEE ASSISTANCE		<b>LUNCH</b> MANDATORY FOR CHILDREN UNDER 44 MONTHS/3.8YRS OLD <input type="checkbox"/> \$30.00/ 5 DAYS PER WEEK <input type="checkbox"/> \$20.00/ 3 DAYS PER WEEK		<b>TOTAL PAID</b> \$ _____	

**\*\*CHEQUES SHOULD BE IN TWO EQUAL INSTALLMENTS DATED FOR JULY 1<sup>ST</sup>, 2018 AND AUGUST 1<sup>ST</sup>, 2018\*\***

OFFICIAL RECEIPT FOR INCOME TAX PURPOSES (PLEASE KEEP A COPY FOR YOUR OWN FILES.)



### EMERGENCY CONTACT(S)

In the event of an emergency, MindTech may contact or release my child to the following people and the person signing this application:

Name Contact (1 Name): \_\_\_\_\_ Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Name Contact (2 Name): \_\_\_\_\_ Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

### MEDICAL INFORMATION

Doctor's Name: \_\_\_\_\_ Office Number: \_\_\_\_\_ Address: \_\_\_\_\_

Please include all Child's Allergies which includes Food Allergies/Restriction

### SUMMER CAMP PARENT AGREEMENT

In the event of an emergency, the school has my permission to administer first aid or any other emergency treatment in the best interest of the child. I agree to pay all expenses incurred due to an emergency involving my child.

I will be sure to advise the school immediately of any changes in address or telephone numbers at home or business plus emergency contacts and numbers so that the school can reach me at all times.

I understand that the safety of all children is of primary concern. The provision of this service is conditional on both my child's compliance with the Code of Behavior and my treatment of the school and its staff. I understand that behavior that poses a safety hazard for the other children or the staff will not be accepted and could result in immediate withdrawal or temporary suspension of service, without a refund of fees.

I agree to pay a late pickup fee as per the regular school year and as outlined in the Parent Student Handbook for any pickup after 6:00 pm. This amount is to be paid in cash the same day directly to the administration or staff on duty.

I understand that there is no reduction or refund of fees during my child's absence from the Summer Camp, for any reason whatsoever. There is no reduction or amendment of weekly fees if it has any holiday whatsoever. Provided my fees are paid up-to-date for the week(s) that I have selected, my child's space will be reserved during any absences. If these fees are not paid in advance, I understand that my child's enrolment could be discontinued. There is a \$100.00 refund penalty for a withdrawal, regardless of one week or more before May 23, 2018, and there are absolutely NO refunds for any reason whatsoever beyond May 23, 2018.

As a parent, I understand that my behavior and treatment towards the school, its staff and students is an important part of our overall program. Should the Director and/or a staff member find my behavior towards the school or its members unacceptable, the Director at his/her discretion may withdraw or suspend my child's registration without notice.

**I HAVE READ, UNDERSTAND, AND AGREE TO ABIDE BY THE ABOVE POLICIES.  
THIS AGREEMENT IS SUBJECT TO CHANGE WITH TWO WEEK'S NOTICE.**

I, \_\_\_\_\_, hereby make application to enroll the above-mentioned child into MindTech. My child and I understand and agree to abide by all of MindTech's policies and regulations as per the Parent & Student Handbook. I hereby release MindTech and its representatives from all claims arising from any accidents or injury howsoever occurred, which are caused by or arise from participation by my child named herein during any program whatsoever, or in any facility or at any location at which a program is held.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Month / Date 2018

\_\_\_\_\_  
Signature of Camp Director