



2024 SUMMER CAMP REGISTRATION FORM

Camper Name (First and Last)	Date of Birth (month/day/year)	Current Age
-------------------------------------	---------------------------------------	--------------------

Please check the box for the session(s) you would like to register your child.

Session 1: JULY 8 - JULY 26
 Week 1- Undersea Adventures
 Week 2- Chemistry in the Kitchen
 Week 3- Trash to Treasure

Session 2: JULY 29 - AUGUST 16
 Week 1: Junior Paleontologist
 Week 2: Bugs! Bugs! Bugs!
 Week 3: Sensational Senses

Camp Hours: 9AM - 2PM
AGES: 2.5 - 8 years old

Camper's Current School: _____ Date of Attendance: _____

Briefly Describe Your Child: _____

Please List Any Food Allergies: _____

Is Your Child Potty Trained? _____ Does Your Child Take a Nap? _____

Mother's Name (print): _____ **Date:** _____

Street Address: _____ City: _____

State/Zip: _____ Home or Cell: _____

Email Address: _____

Father's Name (print): _____ **Date:** _____

Street Address: _____ City: _____

State/Zip: _____ Home or Cell: _____

Email Address: _____

\$1,275 per session

10% sibling discount on 2nd, 3rd, 4th sibling
 Check payable to "Montessori by the Sea"
 Zelle: info@montessoribythesea.org
 All Major Credit Cards Accepted (3% surcharge)