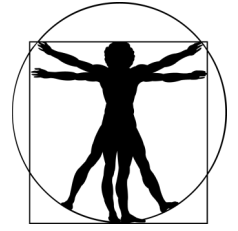


Davinci Day Camp 2018

At the Education Annex of
Leonardo's Children's Museum



Leonardo's is a nonprofit, mission driven program with a history of quality children's educational activities. Each week of Davinci Day Camp will be instructed by a State Certified Teacher with lesson plans that focus on 2-3 days of Art Lessons and 2-3 days of Science Lessons. Since 1992 day camps at Leonardo's have enriched and inspired children of all ages by creating fun learning opportunities. Tuition does NOT cover all costs of camp. If you know of an individual or business that could help with sponsorship, please inquire.



National Endowment for the Arts
arts.gov



Made Possible by a grant from Oklahoma Arts Council and National Endowment for the Arts

Week 1, June 4-8

Bodies in Motion Week

___ All Day ___ AM ___ PM

Week 2, June 11-15

Magic Tree House Week

___ All Day ___ AM ___ PM

Week 3, June 18-22

Health: Fitness, Food & FUN

___ All Day ___ AM ___ PM

Week 4, June 25-29

Davinci Creation Week

___ All Day ___ AM ___ PM

Week 5, July 2-6 (No Camp on 4th)

50 Great American States

___ All Day ___ AM ___ PM

Week 6, July 9-13

Star Wars Week

___ All Day ___ AM ___ PM

Week 7, July 16-20

Holidays Around the World

___ All Day ___ AM ___ PM

Week 8, July 23-27

Super Hero Week

___ All Day ___ AM ___ PM

Important information:

- ⇒ All day: 7:45 a.m. - 5:15 p.m.
- ⇒ AM Session: 7:45 a.m. - 11:30 a.m.
- ⇒ PM Session: 1:30 p.m. - 5:15 p.m.
- ⇒ 1st class begins @8:30
- ⇒ Last class ends @4:30
- ⇒ ALL Day Campers Sack Lunch Required
- ⇒ All snacks and supplies included
- ⇒ Dress to make a mess (creating is messy)

Name: _____
Grade Currently Enrolled: ___ **DOB:** _____
Parent's Name: _____
Phone #: _____
Address: _____

E-mail: _____
Allergies/Special Needs: _____

Cell Phones and Flip Flop Shoes are NOT allowed at Leonardo's Camps!

Members

\$175 - All day, all week
\$100 for 1/2 day all week
AM or PM

Tuition



Non-Members

\$195 - All day, all week
\$120 for 1/2 day all week
AM or PM

Enroll Early

Discounts

- 25% - if ALL 8 weeks paid in full by May 15th
- 20% - if paid in full by April 30th
- 10% - if paid in full by May 31st

Discounts may NOT be combined.



Possible Additional Costs

- (check all that apply)
- \$6 per day for Early Drop-Off* (7:30-7:44 a.m.) # of days? _____
- \$6 per day for Late Pick-Up* (5:15-5:30 p.m.) # of days? _____
- *A substantial late fee will be charged for students not picked up by 5:30 pm. Please be prompt about pick up time.

OFFICE USE ONLY staff initials _____ Method of Payment _____ Cash _____ Credit Card _____ Check _____

Members ___ Yes ___ No Program Release ___ Yes ___ No (CC# _____ V-code _____ Exp _____)

Program Release 2018
Valid for all Leonardo's programs during 2018

Child's Name _____ Date of Birth _____

Name(s) of Custodial Parent(s) _____

Address _____ City, State, Zip _____

Home Phone _____ work/cell phone _____ email _____

Emergency contact/daytime phone _____

Special needs/food allergies _____

Child's Physician's name/phone _____

Release Form:

In case of a medical emergency and I cannot be reached, I being the parent, legal guardian or person authorized to execute this release for the child named above hereby authorize a Leonardo's Children's Museum staff person to contact my family physician and to transport my child to the nearest hospital or to call for an ambulance immediately as the need requires.

I Do/Do not (Circle One) Consent that any videos or photographs made of my child during their programs or classes may be used in future publications. All photos and video shall be the property of Leonardo's Children's Museum and may be used free of any claim.

Standard of Behavior: I understand that my child will be expected to honor Leonardo's behavior rules and show respect for all other program participants. If not, I understand that disciplinary action could be taken, including, but not limited to, dismissal from the program, without any fees refunded.
NO CELL PHONES OR FLIP FLOPS ALLOWED AT CAMP.

Picture I.D. required to pick up students from all programs. **Students must be signed in and out each visit.** In addition to the person signed below, my child may be released to the following people:

1 _____

2 _____

3 _____

Signature of Custodial Parent/Guardian

Date _____