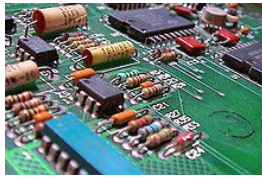


# Circuit-Lab

## Circuit Makers 101

Grades K-2



Let's get creative with electricity! In this junior version of our Hands-On Electronics class, students will gain experience with creating their own electronics; designing custom light-up greeting cards, electric games, mazes, and even musical instruments. Each class day consists of a circuitry lesson and a hands-on electronics project, using components like lights, buzzers, switches, motors, and sensors. Circuit Lab staff will make sure participants create a project that they can be proud of each day. Most class days include a take-home project.

**Thursdays, starts September 26, 2019**                      **8 weeks**  
**September 26, October 3, 10, 17, 24, November 7, 14, 21**  
**3:15-4:45 p.m.**    **Minimum: 7    Maximum: 20**  
**HES Room TBD**    **Fee: \$150.00**

***Register early! Space is limited!***

Class size is limited. Registration is on a first-come first served basis as received in the Community Education office.  
Late pick-up will result in a \$1.00 per minute fee payable immediately to the instructor.  
**REFUND POLICY:** Class fee is non-refundable. Check will be returned only if a class is cancelled.

Please know that it is the policy of the Harvard Public Schools not to discriminate on the basis of race, color, sex, gender identity, religion, national origin, age, disability, or sexual orientation in its educational programs, activities or employment policies as required by Title IX of the 1972 Educational Amendments, Chapter 199, and Section 504 of the Rehabilitation Act of 1973. The district compliance coordinator is Marie Harrington, Director of Pupil Services, 978-456-4143.

Harvard Community Education, 39 Massachusetts Ave., Harvard, MA 01451  
978-456-4118    jcavanaugh@psharvard.org

### SPECTRUM REGISTRATION FORM - Circuit Makers with Circuit Lab Gr K-2

**COMPLETE THIS FORM OR USE THE ONLINE REGISTRATION FORM**  
[www.psharvard.org](http://www.psharvard.org) Departments, Community Education

Name \_\_\_\_\_ Grade/Teacher \_\_\_\_\_

Allergies \_\_\_\_\_

Address \_\_\_\_\_

Best Contact Phone \_\_\_\_\_

e-mail \_\_\_\_\_

Parent Name \_\_\_\_\_

Emergency Contact & phone \_\_\_\_\_  
(Other than parent, in case parent cannot be reached)

Make check payable to: Town of Harvard, 39 Mass. Ave., Harvard, MA 01451  
Or pay online at [www.psharvard.org](http://www.psharvard.org) Online Payment Center

**Registration is on a first-come, first-served basis. Both registration and Payment must be received to be added to the roster.**

**NOTE:** *If using the Unipay/online payment system, you **must** email the payment confirmation number or a copy of the payment confirmation to:*  
[jcavanaugh@psharvard.org](mailto:jcavanaugh@psharvard.org).

I, the undersigned, attest I am the parent or legal guardian of the above named child who attends the COMMUNITY EDUCATION/SPECTRUM program and agree to allow him/her to participate in the above listed SPECTRUM class. I further agree to indemnify and hold harmless the staff, administrators, and official assistants and to absolve them from any and all liability arising from my child's participation in this activity.

I have read and am fully aware of the policies (ie. late pick up, refunds etc.) of Harvard-Community Education and the SPECTRUM Program.

PARENT/GUARDIAN SIGNATURE

DATE

Community Education    978-456-4118    [jcavanaugh@psharvard.org](mailto:jcavanaugh@psharvard.org)

