



SUMMER ADVENTURE! Come have some great summer fun right here at Hildreth Elementary! We use HES Room 151, gym, staff lounge and cafeteria as well as the playground, the Town Beach (If you choose to have your child participate in optional swim lessons at the pond we will register them and take the children to lessons while they are with our program). Optional Tennis lessons with Marcus Lewis Tennis Extension program also available. Our Summer Adventure Staff: Lisa Robichaud, Andy Sawyer, Alexa Cavanaugh, Janet Woodsum and Loren DesJardins (staffing subject to change). Our support staff are high school students and CIT helpers (minimum grade 7 & up). We *all* walk to the pond for Morning swim (playing on the beach for those not taking lessons) Students taking tennis (optional) walk to Bromfield with a staff member or CIT, Project of the Day, games, nature, art & drama, free swim or beach playtime at the end of the day. We'll provide a tasty, cool afternoon snack each day. Students bring their own lunch each day.

PROGRAM DATES:

REGISTER online or print a registration form at:

www.psharvard.org

"Departments" Community Education

Week 1 July 1, 2, 3 (3 days) Independence!

Week 2 July 8-12 (5 days) Let the Drama Begin! "A Year with Bear" stories created from the books by Karma Wilson. Play practice, costume making, play-related art projects

Week 3 July 15-19 (5 days) The Drama continues.....Play activities ending with the performance of "A Year with Bear" stories created from the books by *Karma Wilson* on July 19 (No After-Program care on July 19/Performance day)

Week 4 July 22-26 (5 days) Science Week! Lots of science fun this week along with a field trip to Fruitlands Museum for "A Play Date with the Wind and the Sun"!

Week 5 July 29-August 2, Last Blast of Summer Adventure Fun

Program hours are 8:30 a.m.-4:00 p.m. Children may be dropped off after 8:00 a.m.

After Program care is available from 4:00 p.m.-6:00 p.m. for an additional fee (see registration form).

\$100 non-refundable deposit is required with registration. Tuition balance is due by **June 1**. All forms, including current physical (*within 13 months of program dates*) and Emergency form are due with registration.

Swimming lesson option: \$50/per session. Session I July 1-12, Session II July 15-26. Lessons are offered through Harvard Park & Rec, If you wish to have your child take swim lessons, we will register them (all Summer Adventure students take lessons at the same time). **Swim Sessions are 2 weeks in length**, We will take your child to lessons while they are attending Summer Adventure. *If your child only attends Summer Adventure during 1 of the weeks of swim lessons, it is the parent's responsibility to take the child to lessons during the other week.* Lessons for Summer Adventure participants start at 9:30 a.m. **We register for swim lessons in advance**, slots are limited, please be sure to get your Summer Adventure registration in early!

OR (*May choose either Swimming or Tennis, scheduling does not allow to do both*)

Tennis lesson option (additional fee): Tennis lessons are taught on the courts at The Bromfield School by the Marcus Lewis Tennis Extension Program. Lessons are Monday-Thursday (Friday is a rain make-up date).

Ages 4-8 \$72 Ages 9-14 \$108

Summer Adventure Enrollment is open to Harvard Residents and School Choice students attending HES. Students must be entering grades K-6 in the Fall of 2019.

Space is limited and filled on a first-come first-served basis.

REGISTER Online at www.psharvard.org, "Departments" Community Education, Summer Adventure Online or printable Registration form available.

QUESTIONS? Contact the Community Education office:

jcavanaugh@psharvard.org

978-456-4118

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.

Summer Adventure Program for students entering grades K-6, Fall 2019. *Register online* (www.psharvard.org, Departments, Community Education) *OR print this form* and deliver to the Community Education Office, 39 Mass. Ave., Harvard.

Child's Name _____ Date of Birth _____ Grade Fall 2019 _____

Address _____ Zip Code _____

Parent(s) /Guardian(s) _____ Best Contact Phone _____

E-mail (Please print clearly) _____

	TUITION	
Week 1, July 1, 2, 3, 2019 (3 days) Independence!	\$165	\$ _____
Week 2, July 8, 9, 10, 11, 12 Drama "A Year with Bear" Books by Karma Wilson	\$275	\$ _____
Week 3, July 15-19* Drama "A Year with Bear" Continues <i>(*NO After Program Care on July 19, Drama Performance Day)</i>	\$275	\$ _____
Week 4, July 22-26 (5 days)	\$275	\$ _____
Week 5, July 29-August 2 (5 days)	\$275	\$ _____

SAVE—REGISTER by MAY 15, if your child attends more than 1 week, AND you register BY MAY 15, you may deduct \$10 off tuition for each additional week (first week is full price) Full Payment must be received by June 1. Discount does not apply to Swim lessons or Tennis lessons.

After-program care is available from 4:00-6:00 p.m. (**No After Care July 19**) \$12/day x ____ days \$ _____
 *July 19 no after program care (Reserved/paid by June 1)
 After Care ____ All dates child attends **OR** Specific Dates for After-program care*: _____


Daily/Weekly care reserved and paid by June 1 is \$12/day, After June 1, space available basis \$15/day

Drop-In After-program care on a *space available basis* at \$15/day

OPTIONAL programs (additional fee)—Scheduling permits participation in only Swim OR Tennis, not both.

****OPTIONAL: Swim lessons are \$50/session** ____ Session I (July 1-12) ____ Session II (July 15-26) \$ _____

 Please Circle Swim Level: 1 2 3 4 5 6 *If you are unsure of the lesson level, please take your best guess.*

 **TENNIS OPTION (additional fee):** Tennis lessons *Each session is 4 days, Monday-Thursday (Friday is a rain date). If interested, please indicate which week(s):*

____ 7/8-11 ____ 7/15-18 ____ 7/22-25 ____ 7/29-8/1
 ____ Ages 4-5 from 8:15-9 a.m., \$72 ____ Ages 6-8 from 9-10 a.m., \$72 ____ Ages 9-11 from 10-11:30 a.m. \$108

A \$100 non-refundable deposit is due with this registration form. Check payable to Town of Harvard/SA. Tuition balance is due in full by June 1, 2019. Registrations received on or After June 1 must include full tuition payment. **Tuition is non-refundable.**

IF you are interested in a few full days a week (minimum 2 days) please call the office, let us know what you need, cost \$65/day

Make checks payable to: **Town of Harvard/Summer**

Mail or deliver to: **Harvard Community Education, 39 Massachusetts Avenue, Harvard, MA 01451**

For Office Use Only

Date Received _____ Tuition Total _____ Deposit Received _____ Check Number/Unipay _____

Please Print:

Student's Name: _____

Street _____ Town _____ Zip _____

Parent Best Contact Phone: _____ Alternate Phone: _____

Child's Date of Birth _____ Child's Physician: _____

Physician's Phone/address: _____

Health Care Provider & Plan #: _____

Emergency Contact Person, if we cannot reach parent or guardian (**should be local**):

1. Name and Address: _____

Phone: _____ Relationship: _____

2. Name and Address _____

Phone: _____ Relationship: _____

NOTE: Contact person **must be someone other than the parents** who can be reached in an emergency and can take care of the child if he/she becomes ill during the day.**My child will be picked up by:** _____**Has child had any of the following: Please check those that apply:**

Bleeding/Clotting Disorders _____ Ear Infection _____ Heart Disease _____ Convulsions _____

Frequent Headache _____ Hypertension _____ Diabetes _____ Hay Fever _____

Kidney Disease _____ Head Injury _____ Poison Ivy _____ TB _____

Surgery (What/When) _____

Any Fears _____

Asthma _____ Bee Sting _____ Reaction _____

Current Medication(s) _____

Drug Allergies _____ Food Allergies _____

Activity Restrictions (if yes, please explain) _____

List any health related problems or concerns your child may have that the staff should be made aware of: _____

NOTE: The staff is not authorized to dispense any medication to any child.**Parental/Guardian Authorization:**

To the best of my knowledge, information recorded above is correct and complete. I give my permission for my child to participate in all activities, except as specifically noted herein. In the event that I cannot be reached in an emergency, I hereby give permission to the Nashoba Valley Medical Center or Emerson Hospital to administer emergency treatment.

Signature of Parent/Guardian _____ - _____ Date _____

Permission - Field Trip/Walking Trips/Photo Release/Swimming

I give my permission for my child _____
Please print full name

to attend any field trips that may be scheduled during the time they are registered with Summer Adventure. Field trips will have no effect on pick up times.

Optional SWIMMING LESSONS are conducted by Harvard Park & Rec at Bare Hill Pond. The lessons are scheduled in two week sessions. **If you have chosen to have your child participate in swim lessons we will register your child for lessons (must be done in advance) and bring them to and from lessons during the time they are registered and attending Summer Adventure.**

My child (*named above*) **HAS PERMISSION** _____ **DOES NOT HAVE PERMISSION** _____ to attend the Town sponsored swimming lessons at the Harvard Town Beach while attending Summer Adventure.

My child (*named above*) **HAS PERMISSION** _____ **DOES NOT HAVE PERMISSION** _____ to swim at Bare Hill Pond during afternoon free swim while attending Summer Adventure. Those choosing not to swim will play on the beach. All students who wish to swim will be tested by the Beach Staff for swim level/ability. *Some students will be required to wear a life jacket during free swim (determined by Beach Staff).*

WALKING RELEASE: I am willing _____ I am not willing _____ to let my child walk to the Bromfield playfields and gymnasium as well as nearby locations such as the Common, Nature Trail, Bare Hill Pond and Carlson Orchards. Staff will supervise children on all walking trips.

PHOTOGRAPHIC RELEASE: I do _____ I do not _____ consent and authorize the Summer Adventure program to use and reproduce photographs taken of my child for publicity purposes.

I have read the above statements and give my permission as indicated

Parent/Guardian Signature _____ Date _____