



Now Sign  
Up Online!

Camp is open to students PreK to 8th grade!

### WEEKS:

Week 1—June 25-June 30

Week 2—July 2—July 6 (No Camp Wednesday, 7/4)

Week 3—July 9—July 13

Week 4—July 16—July 20

Week 5—July 23—July 27

Week 6—July 30—August 3

Week 7—August 6—August 10

Week 8—August 13— August 17

### RATES:

Before Care:

7:30AM—9:00AM \$10.00 / day

Half Day:

9:00AM—1:00PM \$28.00 / day

Full Day:

9:00AM—3:00PM \$42.00 / day

After Care:

3:00PM—5:00PM \$12.00 / day

(Campers may want to bring an additional snack for After Care)

### WEEKLY ACTIVITIES (campers will be grouped by age)

MONDAY— Mad Scientist Monday's

TUESDAY— Technology Tuesday's

WEDNESDAY—Wacky Water Wednesday's

THURSDAY— Green Thumb Thursday's (Greenhouse)

FRIDAY— Pizza, Popsicle, & Popcorn Movie Party

(pizza will be provided for lunch on Friday's at no additional charge)

Additional daily activities include:

- Religion, Math, and Reading practice
- Crafts and activities
- Lego and building blocks
- Dot and Dash Robotics and Coding
- Planting and working in the school greenhouse
- Water activities and outdoor play

\*Please bring a labeled snack, lunch, water bottle, bathing suit, towel and backpack to camp everyday\*



2018

Corpus Christi School  
Summer Extension



	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>Week 1</b> June 25—June 30	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care
<b>Week 2</b> July 2—July 6	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<b>NO CAMP</b>	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care
<b>Week 3</b> July 9—July 13	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care
<b>Week 4</b> July 16—July 20	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care
<b>Week 5</b> July 23—July 27	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care
<b>Week 6</b> July 30—August 3	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care
<b>Week 7</b> August 6—August 10	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care
<b>Week 8</b> August 13—August 17	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> Before Care <input type="checkbox"/> After Care

Please use a separate form for each child.

Student Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Parent/Guardian Names: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Number: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Number: \_\_\_\_\_

(other than parent/guardian)

Allergies / Medical Information (if needed): \_\_\_\_\_