



Now Sign
Up Online!

Camp is open to students PreK to 5th 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
Week 1 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
Week 2 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	NO CAMP	<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
Week 3 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
Week 4 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
Week 5 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
Week 6 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
Week 7 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
Week 8 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): _____