



HILLTOP MONTESSORI SCHOOL

SUMMER CAMP 2009

APPLICATION FORM

Camp total \$	_____
Payment 1	
Ck:	\$ _____
Payment 2	
Ck:	\$ _____

Circle the session(s) your child plans to attend and check the time box:

<u>TODDLER</u>	
6/1-6/12	Construction
6/15-6/26	Up, Down & In
6/29-7/10	Eating & Cooking*
7/13-7/24	Zoo Animals
\$300	

<u>PRESCHOOL</u>		
6/1-6/12	Gardening/Outdoors	
6/15-6/26	Spanish Immersion	
6/29-7/10	Move your Feet	
7/13-7/24	Harvesting/Cooking*	
<input type="checkbox"/> 9a-12-p	<input type="checkbox"/> 9a-12:30p	<input type="checkbox"/> 9a-2p
\$270	\$320	\$420

<u>ELEMENTARY</u>	
6/1-6/12	Music/Art*
6/15-6/26	Movie Making**
6/29-7/10	Math Games
7/13-7/24	Writing/Dig. Photo**
\$400	

* ** class requires additional supply fee * \$10 ** \$12

Child's Name _____ Toddler Preschool Elementary

Date of Birth ___/___/___ Age on 6/02/08 _____ Current Hilltop Student: YES NO

Home Address _____
Street City State Zip

Home Phone #() _____ Home E-mail _____

Does your child have any special needs, health issues or allergies?

Child's Physician _____ Phone _____

Insurance _____ Policy # _____

Policy Holder _____ Relation to child _____

Mother _____ **Father** _____

Address _____ Address _____

Work # _____ Cell # _____ Work # _____ Cell # _____

E-mail _____ E-mail _____

Do both parents have legal guardianship of the child? YES NO

If no, identify custodial parent _____

Person -- mailings from the school should be sent _____

Person -- bills from the school should be sent _____

Half Payment Due by April 10, 2009 / Full Payment Due by May 1, 2009

Elementary Camps are for students entering Grades 1 – 8 in fall 2009. Children currently completing kindergarten at Hilltop should attend Elementary camps. Children currently completing kindergarten at a different school will be considered for Elementary Camps if they read well and receive prior permission – otherwise, they are welcome to join us in Hilltop's exciting Preschool Camps. Toddler camps are for ages 18 months through 3. Children who are toilet trained and are 3 should be enrolled in the preschool camp.

All final paperwork for Camp Sessions, plus additional information will be sent home in May.

*** Camp Themes/Teachers Subject to Change ***

6 Abbott Square, Birmingham, AL 35242 ♦ (205)437-9343 ♦ Fax (205)437-9344 ♦ HMS@hilltopmontessori.com

www.hilltopmontessori.com

STUDENT RELEASE AND EMERGENCY CONTACT INFORMATION

An original AL Immunization Certificate(Blue form) MUST accompany application.
Current students excluded, form on file.

Child's Full, Legal Name _____

Preferred name if different from above _____

Date of Birth ____/____/____ Age on 9/1/09 ____ Grade _____ Teacher's Name _____

RELEASE INFORMATION

My child may be released to only the following people (car pool, check-out, transportation)with a written note or phone call from the parent/guardian. **MUST include parent/guardian information.**

Name _____

Relationship MOTHER _____ Day Phone _____ Cell _____

Name _____

Relationship FATHER _____ Day Phone _____ Cell _____

Name _____

Relationship _____ Day Phone _____ Cell _____

Name _____

Relationship _____ Day Phone _____ Cell _____

EMERGENCY CONTACT INFORMATION

MUST include parent/guardian information.

All names same as above

Name _____

Relationship MOTHER _____ Day Phone _____ Cell _____

Name _____

Relationship FATHER _____ Day Phone _____ Cell _____

Name _____

Relationship _____ Day Phone _____ Cell _____

Name _____

Relationship _____ Day Phone _____ Cell _____

Hilltop Montessori School has my permission to give my child medical attention in the event of an emergency and I cannot be contacted. I give the staff authorization to secure and consent to medical treatment or services. I agree to assume responsibility for payment of all medical costs incurred.

Parent/Guardian Name _____

Parent/Guardian Signature _____ Date _____