

Schedule

Week 1: June 10-14

Fun Fairy Tales

Week 2: June 17-21

Reduce, Reuse, Recycle

Week3: June 24-28

Underwater Adventure

***Week4: July 1-5**

Come Fly With Me

Week5: July 8-12

Lake Life

Week6: July 15-19

Sharks & Dolphins

Week7: July 22-26

Creepy Crawlers

Week8: July 29-Aug 2

Nature Play

Week9: Aug 5-9

Wild Things

Week10: Aug 12-16

Friends on the Farm

* closed on July 4th for holiday



The philosophy and guiding principles of The Partnership School of Cape Cod teach the whole child through:

- A partnership among educators, parents and children
- A respect of self, others and the greater community
- A relationship based on mutual trust among all members of our community
- A strong educational experience where each child is able to reach his or her full potential.

17 Nell's Way, Orleans, MA 02653

774-801-2287

www.thepartnershipschool.org



SUMMER 2019

June 10-August 16

- New themes each week
- "Back to basics" fun
- Music, art and movement
- Nature-based activities
- Small, nurturing environment
- Suitable for ages 3-9



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FEES

Half Day (9-12:30)

Full day (9-3)

After Care (3-5)

2 DAY PROGRAM

(Tuesday & Thursday)

Half Day \$100.00 per week

Full Day \$ 130.00 per week

3 DAY PROGRAM

(Monday, Wednesday & Friday)

Half Day \$ 140.00

Full Day \$ 185.00

5 DAY PROGRAM

(Monday-Friday)

Half Day \$230.00

Full Day \$305.00

AFTER CARE

(3:00-5:00 PM)

\$20.00 daily

FEE & REFUND POLICY

- Registration will not be processed unless accompanied by full payment.
- \$50 of tuition is a non refundable administrative fee
- No refunds or credits for cancellations, absences or withdrawals.
- Sessions are not pro-rated for missed days.

Summer Program at The Partnership School of Cape Cod 2019

June 10 - August 16

Please complete one application per child. Payment in full must accompany applications. Mail completed applications with check or credit card number to The Partnership School of Cape Cod, 17 Nell's Way, Orleans, MA 02653.

(Please print) Child's Last Name _____ First Name _____ DOB _____ M/F _____
 Parent/Guardian Name _____ Phone _____
 Email _____
 Street _____ Town _____ State _____
 Zip Code _____

Please circle all the choices that apply.

Week #1 FUN FAIRY TALES

2 Day (T,TH) , 3 Day (M,W,F) , 5 Day (M-F) : Half Day (9-12:30) , Full Day (9-3) , After Care (3-5) Fee \$ _____

Week #2 REDUCE, REUSE & RECYCLE

2 Day (T,TH) 3 Day (M,W,F), 5 Day (M-F) :Half Day (9-12:30), Full Day (9-3) , After Care (3-5) Fee \$ _____

Week #3 WHAT LIVES UNDERWATER?

2 Day (T,TH) , 3 Day (M,W,F), 5 Day (M-F) :Half Day , (9-12:30) , Full Day (9-3) , After Care (3-5) Fee \$ _____

Week #4 COME FLY WITH ME

2 Day (T,TH) , 3 Day (M,W,F), 5 Day (M-F) :Half Day , (9-12:30) , Full Day (9-3) , After Care (3-5) Fee \$ _____

Week #5 LAKE LIFE

2 Day (T,TH) , 3 Day (M,W,F), 5 Day (M-F) :Half Day , (9-12:30) , Full Day (9-3) , After Care (3-5) Fee \$ _____

Week #6 SHARKS & DOLPHINS

2 Day (T,TH) , 3 Day (M,W,F), 5 Day (M-F) :Half Day , (9-12:30) , Full Day (9-3) , After Care (3-5) Fee \$ _____

Week #7 CREEPY CRAWLERS

2 Day (T,TH) , 3 Day (M,W,F), 5 Day (M-F) :Half Day , (9-12:30) , Full Day (9-3) , After Care (3-5) Fee \$ _____

Week #8 NATURE PLAY

2 Day (T,TH) , 3 Day (M,W,F), 5 Day (M-F) :Half Day , (9-12:30) , Full Day (9-3) , After Care (3-5) Fee \$ _____

Week #9 WILD THINGS

2 Day (T,TH) , 3 Day (M,W,F), 5 Day (M-F) :Half Day , (9-12:30) , Full Day (9-3) , After Care (3-5) Fee \$ _____

Week #10 FRIENDS ON THE FARM

2 Day (T,TH) , 3 Day (M,W,F), 5 Day (M-F) :Half Day , (9-12:30) , Full Day (9-3) , After Care (3-5) Fee \$ _____

TOTAL \$ _____

Payment in full is required for registration. Check # _____ or Visa, MC # _____
 Exp. Date _____ CID# _____ Signature of Cardholder (required) _____

- If you are signing up for more than 5 weeks please contact Stephanie (stephanie@thepartnershipschool.org) for payment options . Thank you!