

BENSON MEMORIAL UNITED METHODIST CHURCH
WEEKDAY PROGRAMS
2010 SUMMER ENRICHMENT PROGRAM
4706 CREEDMOOR RD, RALEIGH, NC 27612
919-781-3310

Benson Memorial United Methodist Church Weekday Programs offers a Summer Enrichment Program. It is structured much like our regular program, with time for guided play, art activities, snack, circle time, and outside play. If you are interested in enrolling your child, please read the following information.

Return the registration form with the proper fees by **February 17** for children currently enrolled in our program, siblings, and church members and by **February 24** for children outside our program. If we have more applicants than spots available, we will conduct a lottery.

PROGRAM INFORMATION

The summer program begins on June 8 and ends on August 5.

HOURS: The program will operate from 9:00am to 1:00pm.

DAYS: Tuesday, Wednesday and Thursday. Children must enroll for all three days.

WEEKS: The program operates for a total of eight weeks. Ideally, students will enroll for the entire eight-week program; however, you may enroll the week/s you prefer.

The week of: JUNE 21-25, Summer Enrichment will be CLOSED for Vacation Bible School – If you would like to enroll call Kristina at 787-0789

CLASSES: - Children will be placed by age, no exceptions should be requested.

Under Two Class Room – must be 6 months but not 2 by 10/16/10 - Ratio - 2:8

Two's Class Room – 2 by 10/16/10 - Ratio - 2:10

Three's Class Room – age 3 by 10/16/10 - Ratio - 2:12

Four's Class Room – age 4 by 10/16/10 - Ratio - 2:14

Five's Class Room – age 5 by 10/16/10 - Ratio - 2:16

School Age Class Room – age 6 by 10/16/10 but not older than 7 - Ratio - 2:16

ACTIVITIES: Each class will follow a daily schedule. Activities are related to daily and weekly themes. Each day's activities will include time for free play, guided play, art activities, snack, circle time, and outside play. The classes will spend time together outside on the playground. We will also meet as a group for a daily Popsicle break.

SNACK: Parents sign-up to provide a morning snack each day, along with a daily Popsicle break.

LUNCH: Send a lunch with your child. Lunch should include a drink, napkin and any utensils your child may require.

SUMMER ENRICHMENT PROGRAM 2010
REGISTRATION INFORMATION

Explanation of payments and payment options 2010

Registration preference will be given to families choosing the full eight-week program. Your child's registration form must be accompanied by a registration fee. **This registration fee is non-refundable if we have a slot for your child.** If we do not have space in the program for your child, we will not retain your registration fee.

You are responsible for tuition for all weeks for which you register.

Drop in care can be requested at a cost of \$40.00 per day.

You may deliver your payments to the school or you may mail them to 4706 Creedmoor Road, Raleigh, NC 27612.

1. For those attending fewer than 4 weeks, summer tuition is due by May 21.
2. For those attending more than 4 weeks, you may pay your tuition in two equal installments:
 - First installment due by May 21.
 - Second installment due by July 1.

If we do not have space in the program for your child we will not retain your registration fee.

The Non-Refundable Registration Fee must accompany the registration form.

**BENSON MEMORIAL UMC
SUMMER ENRICHMENT PROGRAM 2010
FEES**

FIVES & SCHOOL AGE

Weeks Enrolled	Registration Fee	Tuition	Total Fees	Payment Due May 21, 2010	Payment Due July 1, 2010
Per week	15.00	69.00	84.00	69.00 per week	-
8 weeks	95.00	465.00	560.00	232.50	232.50

FOURS

Weeks Enrolled	Registration Fee	Tuition	Total Fees	Payment Due May 21, 2010	Payment Due July 1, 2010
Per week	15.00	71.00	86.00	71.00 per week	-
8 weeks	95.00	474.00	569.00	237.00	237.00

THREES

Weeks Enrolled	Registration Fee	Tuition	Total Fees	Payment Due May 21, 2010	Payment Due July 1, 2010
Per week	15.00	73.00	88.00	73.00 per week	-
8 weeks	95.00	488.00	583.00	244.00	244.00

TWOS

Weeks Enrolled	Registration Fee	Tuition	Total Fees	Payment Due May 21, 2010	Payment Due July 1, 2010
Per week	15.00	75.00	90.00	75.00 per week	-
8 weeks	95.00	498.00	593.00	296.50	296.50

UNDER TWO

Weeks Enrolled	Registration Fee	Tuition	Total Fees	Payment Due May 21, 2010	Payment Due July 1, 2010
Per week	15.00	78.00	93.00	78.00 per week	-
8 weeks	95.00	510.00	605.00	299.00	299.00

Drop in may be an option if space is available. The drop in Rate = \$40.00 a day if available.

BENSON MEMORIAL UNITED METHODIST CHURCH
WEEKDAY PROGRAMS
SUMMER ENRICHMENT PROGRAM 2010

POLICIES AND INFORMATION

IMPORTANT NOTE: If we are not able to fill a minimum number of spaces, we will be unable to offer the summer program. If this should occur, you will receive a full refund. If we are unable to fill a minimum number of spaces in a week, we will have to eliminate that week from the program. Should this occur, we would return the registration fee for that particular week and any tuition paid in advance. If you have any questions regarding this information, please feel free to call the preschool office and speak with Shannon at 781-3310.

- The program hours of operation are from 9:00am to 1:00pm. Children are not allowed into the classroom before 9:00am and all children must be picked up promptly at 1:00pm. You will be charged a late fee of \$5.00 for every 5 minutes late.
- Parents are required to sign their child in and out each day. A telephone number should be left where a parent can be reached in the event of an emergency.
- Parents should label all of their child's belongings.
- A morning snack is provided.
- **Please send a lunch with your child.** Lunch should include a drink, napkin and any utensils your child may require.
- If your child wears diapers, please be sure to pack a bag with diapers, wipes and a change of clothes. (All students enrolling in the **preschool** program should be potty trained.)
- Each child is required to donate a package of wipes toward popsicle clean up each day.
- Please keep a sick child at home. If your child becomes sick and you are called, please pick him/her up immediately.
- The parent agrees not to hold the program, its Staff, Executive Board, or Benson Memorial United Methodist Church responsible for any mishap or injury to the child incurred either in the building or on its grounds.
- The school does provide an accident insurance policy for school hours only. If your child should require immediate medical attention, the parent agrees to reimburse the Weekday Program for any costs or fees incurred.
- Registration preference will be given to families choosing the full eight-week program.
- The entire week's tuition must be paid even though your child may be absent some days.
- **You are responsible for tuition for all weeks for which you register.**

If you have any questions regarding this information, please feel free to call the preschool office and speak with Shannon at 781-3310.

**BENSON MEMORIAL UNITED METHODIST CHURCH
WEEKDAY PROGRAMS
SUMMER ENRICHMENT PROGRAM 2010**

REGISTRATION FORM

Child's age _____ by 10/16/10 Date of birth _____ Student's Gender M / F

Name of child _____ called by _____

Home Phone _____ Home/main Email _____

Address _____

Mother's name _____ Father's name _____

Father's place of work _____

Cellular/Pager _____ Work phone _____

Mother's place of work _____

Cellular/Pager _____ Work phone _____

Member of Benson Memorial Church? _____

Friends or relatives to call if you cannot be reached in an emergency. These people are able to pick up your child in your absence.

Name & Phone #	Relationship
_____	_____
_____	_____
_____	_____
_____	_____

Name of child's doctor _____ Phone _____

Special needs or allergies _____

Favorite activities and interest _____

What school does your child currently attend? _____

I have read and agree to the Benson Memorial Weekday Summer Program Policies.

Signed _____ Date _____

**BENSON MEMORIAL UNITED METHODIST CHURCH
WEEKDAY PROGRAMS
SUMMER ENRICHMENT PROGRAM 2010**

REGISTRATION FORM part II

Child's name _____ Date of birth _____

Child's age _____ by 10/16/10

Days are Tuesday, Wednesday and Thursday.

Please check one below.

_____ I would like the full eight weeks of summer camp.

_____ I would like the following weeks of summer camp.

1. _____ JUNE 8 - 10,
2. _____ JUNE 15 - 17,
3. _____ JUNE 29 - JULY 1
4. _____ JULY 6 - 8
5. _____ JULY 13 - 15
6. _____ JULY 20 – JULY 22
7. _____ JULY 27 - 29
8. _____ AUGUST 3 - 5

The week of: JUNE 21 – 25, Summer Enrichment will be CLOSED for Vacation Bible School – If you would like to enroll call Kristina at 787-0789

Registration preference will be given to families choosing the full eight-week program.

Please remember your child will attend, Tuesday, Wednesday and Thursday

I have read and agree to the Benson Memorial Weekday Summer Program Policies.

Signed _____ Date _____

**BENSON MEMORIAL UNITED METHODIST CHURCH
WEEKDAY PROGRAMS
SUMMER ENRICHMENT PROGRAM 2010
4706 CREEDMOOR RD, RALEIGH, NC 27612
919-781-3310**

CALENDAR

JUNE 8 – 10

JUNE 15 – 17

JUNE 29 – JULY 1

JULY 6 – 8

JULY 13 – 15

JULY 20 – 22

JULY 27 – 29

AUGUST 3 – 5

The week of: JUNE 21 – 25, Summer Enrichment
will be CLOSED for Vacation Bible School
If you would like to enroll call Kristina at 787-0789