



Announcing . . .

Diane K. Trust Center for Early Education

Vacation Camp



No School !?! . . . Jump right into TCEE Vacation camp!

Join our amazing TCEE staff for a variety of innovative educational, lively, developmentally appropriate and exciting activities for current and prospective TCEE students and TOS synagogue members ages 2 years 9 months through age 5 during February & April school vacation.

Tuesday, February 21, 2012 - Friday, February 24, 2012
and

Tuesday, April 17, 2012 - Friday, April 20, 2012
9 am—3 pm daily, early drop-off & extended day available

Over for more information and full details.





**Diane K. Trust Center
for Early Education
of Temple Ohabei Shalom**

Nurturing Our Children, Building Our Future

1187 Beacon Street • Brookline, MA 02446 • (617) 264-2801

TCEE Vacation Camp Details . . .

TCEE Vacation Camp is open to all current and prospective TCEE students, BEEP on Beacon students, and TOS Synagogue members with children ages 2 years 9 months to 5 years old.

Dates: Tuesday, February 21, 2012 through Friday, February 24, 2012 and/or
Tuesday, April 17, 2012 through Friday, April 20, 2012

Staff: Each week will be run by our TCEE teachers and staff.

Schedule: The Camp Day runs from 9am-3pm, with early drop-off and extended day options available. This will allow our teachers and students to fully enjoy a variety of activities for each day's theme. Mixed age groupings will build a sense of camp community and nurture peer to peer learning.

TCEE Vacation Camp will include a variety of programs including indoor and outdoor activities as well as music and movement. TCEE will provide a morning and afternoon snack each day. Campers will bring their own lunch.

Enrollment and Tuition Policies

- Camp Tuition
 - Camp Program (9 am – 3 pm) \$60 per day
 - Extended day (3 pm – 6 pm) \$30 per day
 - Early Drop Off (8 am – 9 am) \$10 per day
- All children must pre-register by January 20, 2012. A minimum of six (6) children each day is required to run this program. TCEE will determine if there are enough children to run the vacation camp by January 21, 2012. TCEE will send out a confirmation email (and tuition bill if applicable) on January 24, 2012.
- Registration forms require a non-refundable* \$60 deposit per child.
- February Camp tuition payments will be due on February 1, 2012. April Camp tuition is due on April 1, 2012. Tuition payments are non refundable.

*If we determine that there are not enough children to run the program, the deposit will be returned.

Please respond by January 20, 2012. Thank you.



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TCEE Vacation Camp Registration Form

Please complete and return to the TCEE office with a \$60 deposit per child by **Friday, January 20, 2012:**

Child's Name _____ Child's Birthdate _____

February Vacation Camp: Tuesday, February 21, 2012 – Friday, February 24, 2012

Please check (✓) the choice(s) of days and/or times you would like your child (ren) to attend.

Tuesday February 21, 2012	Wednesday February 22, 2012	Thursday February 23, 2012	Friday February 24, 2012
___ Camp Day (9 am – 3 pm)	___ Camp Day (9 am – 3 pm)	___ Camp Day (9 am – 3 pm)	___ Camp Day (9 am – 3 pm)
___ Extended Day (3 pm – 6 pm)	___ Extended Day (3 pm – 6 pm)	___ Extended Day (3 pm – 6 pm)	___ Extended Day (3 pm – 6 pm)
___ Early Drop Off (8 am – 9 am)	___ Early Drop Off (8 am – 9 am)	___ Early Drop Off (8 am – 9 am)	___ Early Drop Off (8 am – 9 am)

April Vacation Camp Tuesday, April 17, 2012 – Friday, April 20, 2012

Please check (✓) the choice of days and/or times you would like your child (ren) to attend.

Tuesday April 17, 2012	Wednesday April 18, 2012	Thursday April 19, 2012	Friday April 20, 2012
___ Camp Day (9 am – 3 pm)	___ Camp Day (9 am – 3 pm)	___ Camp Day (9 am – 3 pm)	___ Camp Day (9 am – 3 pm)
___ Extended Day (3 pm – 6 pm)	___ Extended Day (3 pm – 6 pm)	___ Extended Day (3 pm – 6 pm)	___ Extended Day (3 pm – 6 pm)
___ Early Drop Off (8 am – 9 am)	___ Early Drop Off (8 am – 9 am)	___ Early Drop Off (8 am – 9 am)	___ Early Drop Off (8 am – 9 am)

Authorization

I give my permission for my child _____ (name) to participate in TCEE Vacation Camp. I understand that tuition adjustments will not be made for absences due to illness, weather or other circumstances. This will serve to release Temple Ohabei Shalom of Brookline, MA, all of their personnel, employees, and representatives from all responsibilities other than program, included meals and supervised, scheduled activities. I waive and release all rights for damages or injuries to my child that may occur with the participation in this program.

Parent's Printed Name _____ Parent Signature _____