



Science - Technology - Environment - Arts - Math

*School Age
Summer Adventure*



Lake Forest Park Montessori

19935 19th Ave. NE, Shoreline, WA 98012
(206) 367-4404

All Things

STEAM

+ Beyond

friendships



nature



memories



ideas



challenges



imagination



science



art



technology



engineering



physical fitness



wonder

exploration



math



culinary



community outreach



adventure



creativity



wildlife





School Age Summer Adventure

Lake Forest Park Montessori

SUMMER CAMP ADVENTURE

Lake Forest Park Montessori offers fun-filled summer programs for children ages 5-12.

Each week, campers jump into action, participating in exciting sports, exploring nature, becoming involved in performing and creative arts, playing a part in group activities, and attending special events.

Our campers have the opportunity to expand their horizons during the summer, embarking on new adventures, and having fun! Our exceptional program and dedicated staff create an environment that forges lifelong friendships among our campers. We create a summer experience that is unforgettable!

It all starts with our outstanding camp counselors.

A camp is only as good as its staff, and we are extremely proud of ours. Talent, creativity, love of children, leadership and devotion make our camp counselors the best.

Camp Lake Forest Park Montessori gives you choices.

Camp includes five days of activities, from 9:00 am – 3:00 pm. You can choose to add extended hours to your menu of summer fun. We offer a range of outdoor activities, plus indoor activities.

DESTINATION ADVENTURE

For Ages 8 – 12 years

This exciting camp leaves no time to get bored. Every day involves a new destination (or revisiting favorite ones).
Geocaching Adventures – With the use of a GPS the children will find caches hidden in parks throughout the Puget Sound.

Kayaking, swimming, eateries, skating, metal detecting, sports events, games, water park, Funtasia, fort exploring, beach combing, hiking and MORE!

Camp Hours

Monday-Friday 9:00am - 3:00pm

Extended Care 6:30am - 6:00pm

Camp Schedule

Week 1	June 22 - 26	Week 6	July 27 - 31
Week 2	June 29 - July 3	Week 7	Aug. 3 - 7
Week 3	July 6 - 10	Week 8	Aug. 10 - 14
Week 4	July 13 - 17	Week 9	Aug 17-21
Week 5	July 20 - 24	Week 10	Aug 24 - 28



Special Features

Activities

- *Quality staff
- *Flexible, extended hours
- *Field trips, special events
- *Indoor and outdoor camp
- *On Campus Activities
- *Physical Education
- *S.T.E.M
- *Themed Activities
- *Wii Fitness System
- *Arts & Crafts



HIGHLIGHTS

Chesterbrook Academy Camp Adventure

Sample Daily Schedule



STEAM + BEYOND

7-8:00am	<i>Before Care–Camp Mash Up</i>
8-9:00am	A Bright Green Idea <i>Snack/Campers Choice</i>
9-10:00am	<i>Campers Today Leaders Tomorrow</i>
10-11:00am	<i>Field Trip/On Campus Event</i>
11-12:00pm	<i>Nature Gone Wild, Wacky & Weird</i>
12-1:00pm	<i>Lunch and Recess</i>
1-2:00pm	Sport Academy Extravaganza
2-3:00pm	Challenge Week
3-4:00pm	Art Creativity <i>Snack/Campers Choice</i>
4-5:00pm	<i>Fear Factor</i>
5-6:30pm	<i>After Care–Camp Mash Up</i>

**See next page for details*

Field Trips & On Campus Activities

All Campers

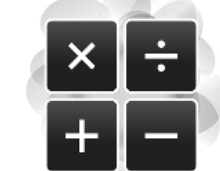
Chesterbrook Academy Camp Adventure features a unique selection of indoor and outdoor activities and field trips that take advantage of resources in the local area.

Our summer campers have the opportunity to expand their horizons, embark on new adventures, and have fun. Our exceptional program and dedicated staff create an environment that forges lifelong friendships among our campers. We create a summer experience that is unforgettable! Camp activities include sports & games, creative arts, arts & crafts, science & cooking, songs & skits, field trips, group activities, special guests water play and/or swimming.

Designed for Doing, NOT Just Reading.

Klutz has it all: drawing, bead art, fairies, jewelry, magic, science, and more. Klutz books and activities are perfect for exploring new creative interests and for expanding on old favorites. Most activities come in multiple themes to appeal to discerning creative minds.

Klutz books brings creativity to life during our Camp Activity hour!!!





SCHOOL AGE SUMMER PROGRAM STEAM

(science, technology, environment, art and math)

Lake Forest Park Montessori

Each week campers will engage in 10 **STEAM** blocks that are relevant, meaningful experiences that allow them to construct new knowledge while connecting to previous knowledge and their own experiences. **STEAM** activities provide an opportunity for campers to engage, explore and make sense of the natural world through inquiry and project-based learning.



A Bright Green Idea:

Inventions that are simply amazing! Behind every discovery is a curious mind.



Campers Today Leaders Tomorrow:

Empowering future leaders with numerous workshops and activities focused around personal leadership, organization, public speaking, teamwork, ideas, and more...



Fear Factor-Symphony of 5 Senses:

The 5 senses science activities and experiments help show campers the fun side of learning science.

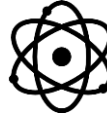


Construction Campers-Real Tools for Small Hands:

Known for the dynamic project kids build. Encourages collaboration as well as the advancement of individual building skills.



Challenge Week-An Experience of a Lifetime: Take on many different challenges.



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Sports Academy Extravaganza:

Come be part of a summer camp that continues to emphasize a vast exposure to a variety of sports.



Art Creativity:

Get inspired with creative summer programs where creativity is not just allowed, but applauded



The X Factor:

Be empowered, trained & mentored in becoming the next generation of leaders who will impact the community/world through a lifelong commitment to community service.



Nature Gone Wild, Wacky & Weird:

Experiment with everything, every law, every force, every constant, and every effect.



Summer Camp Mash Up:

Dream It. Make It. Do it.

Camp Fee Schedule 2015

Camper's Name: _____	Grade: _____ Birth Date: _____	Sponsor's Name: _____	Date: _____
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Please Check Camp Week(s) Your Child Will Attend

Week(s)	6/15	6/15	6/22	6/29	7/6	7/13	7/20	7/27	8/3	8/10
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weekly Fee(s)	\$175	\$175	\$175	\$175	\$175	\$175	\$175	\$175	\$175	\$175

Payment Policy: A deposit fee of \$175. is required at time of enrollment to hold your reservation. The deposit will be applied to your campers final week of camp. Weekly camp fees are due every Monday morning at drop-off for that week of Camp.

Payment Methods	Cash or Check Payable to: Chesterbrook Academy	Check # _____ Amount: _____	Cash Amount: _____
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Camp T-Shirts are \$15 each. Please check the size your camper(s) wear:

Youth XS Youth S Youth M Youth L Adult S Adult M

Quantity: _____ X \$15 = _____

*Each camper receives a Camp Chesterbrook Academy bag upon registration.

REGISTRATION FORM

Camper Information

Camper's Name _____ Male Female
Address _____ City _____ State _____ Zip _____
Camper's Birth Date _____ Age on June 1st _____ Grade in the Fall _____
Parent/Guardian 1 _____ Male Female Home# _____ Cell# _____
Email Address _____ Employer _____ Business# _____
Parent/Guardian 2 _____ Male Female Home# _____ Cell# _____
Email Address _____ Employer _____ Business# _____
Child in custody of (Please check one) Both parents Mother Father Other (Specify) _____
Child lives with (Please check one) Both parents Mother Father Other Specify _____
Does your child know how to swim? Yes No Do you give permission for your child to swim in Camp Zone programs? Yes No
Do you give permission for your child to attend and participate in all activities on Camp Zone field trips? Yes No

Medical Information

Family Physician _____ Address _____ Phone# _____
Dentist/Orthodontist _____ Address _____ Phone# _____
Medical/Hospital Insurance Carrier (Note: Please submit a copy of insurance card) _____
Health History - (Mark all that apply & provide copies of all immunizations) Ear Infection Convulsions Asthma Bleeding/Clotting Disorder
Allergies Pollen Poison Oak/Ivy/Sumac Penicillin Insect Stings (List Type) _____ Foods (List Type) _____ Other (List Type) _____
Operations, serious injuries, diseases, or restrictions on physical activity: _____
Current medication and purpose (all medication sent to camp must be given to camp director and labelled clearly with doctor's instructions): _____
Behavioral conditions or problems of which camp staff should be aware _____

Child Release Authorization

In addition to Parent/Guardian names listed above, these person(s) have permission to pick up my child from Camp Zone. I understand that my child will not be allowed to leave with any person without authorization from Parent/Guardian, and that the person picking up my child will need to show identification.

Name: _____ Phone#: _____ Relation _____ DL# _____
Name: _____ Phone#: _____ Relation _____ DL# _____

Parent Authorization/Medical Release: The information provided is correct to the best of my knowledge, and the person described has my permission to engage in all prescribed camp activities, except if noted by me. In the case of sickness or accident, I hereby give permission to the medical personnel selected by the camp representatives to order x-rays, routine tests, treatment, dental work, and necessary transportation for the recipient at my expense. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp representative to secure and administer treatment, including hospitalization, for my child as named above. This form may be photocopied for use away from the main program site. I authorize the NLCI staff to apply sunscreen to my child's exposed skin on an as needed basis - if child needs assistance. All photos that are taken of my child may be used for promotional purposes.

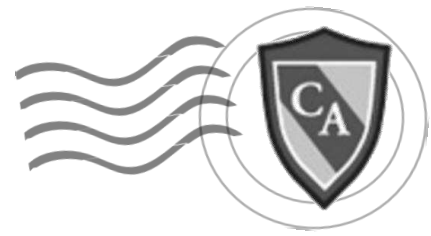
PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

**New Discoveries,
Great Friends,
Fun Times!**



Chesterbrook Academy

9861 SW Village Parkway | Port St. Lucie, Fl. 34987 | 772.345.0860 |
Portstlucie.chesterbrookacademy.com



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Summer  ***Adventure***

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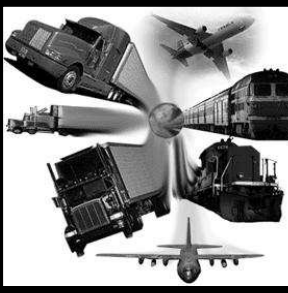
engineering



physical fitness



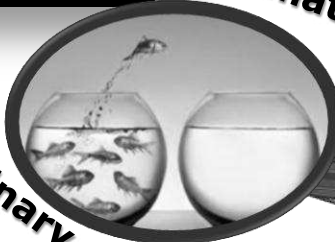
math



wonder



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community outreach



creativity



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wildlife



adventure





WELCOME!

Chesterbrook Academy Camp Adventure

SUMMER CAMP ADVENTURE

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Each week, campers jump into action, participating in exciting sports programs, exploring nature, becoming involved in performing and creative arts, playing a part in group activities, and attending special events.

Our campers have the opportunity to expand their horizons during the summer, embarking on new adventures, and having fun! Our exceptional program and dedicated staff create an environment that forges lifelong friendships among our campers. We create a summer experience that is unforgettable!

It all starts with our outstanding camp counselors.

A camp is only as good as its staff, and we are extremely proud of ours. Talent, creativity, love of children, leadership and devotion make our camp counselors the heart and soul of the program. We take our camp programs seriously and begin our summer with intensive staff training and orientation. Camp counselors and specialists are doing exactly what they enjoy most: spending a summer inspiring campers to explore, reach for new heights, and expand their horizons.

Camp Chesterbrook Academy gives you choices.

Camp includes five days of activities, from 8:30 am – 4:30 pm. You can choose to add extended hours and specialty camps to your menu of summer fun. We offer a range of outdoor activities, plus indoor activities conducted in our fully air conditioned facility. Our specialty camps are optional programs, operating during regular camp hours, which provide even more choices for unique and exciting adventures.

Camp Hours

Monday-Friday 8:30am - 4:30pm

Extended Care 7:00am - 6:30pm

Camp Schedule

Week 1	June 8 - 12	Week 6	July 13 - 17
Week 2	June 15 - 19	Week 7	July 20 - 24
Week 3	June 22 - 26	Week 8	July 27 - 31
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Special Features

Activities

- *Quality staff
- *Flexible, extended hours
- *Field trips, special events
- *Indoor and outdoor camp
- *Air conditioned facility/bus
- *Lunch program
- *Family activities
- *On Campus Activities

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HIGHLIGHTS

Chesterbrook Academy Camp Adventure

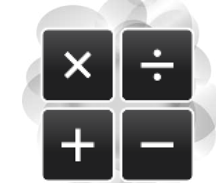
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*See next page for details



Field Trips & on Campus Activities

All Campers

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The 5 senses science activities and experiments help show campers the fun side of learning science.



Construction Campers-Real Tools for Small Hands:

Known for the dynamic project kids build. Encourages collaboration as well as the advancement of individual building skills.



Challenge Week-An Experience of a Lifetime: Food challenges, color wars, etc...in daily camp challenges.



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Sports Academy Extravaganza:

Come be part of a summer camp that continues to emphasize a vast exposure to a variety of sports.



Nature Gone Wild, Wacky & Weird:

Experiment with everything, every law, every force, every constant, and every effect.



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Art Creativity:

Get inspired with creative summer programs where creativity is not just allowed, but applauded



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Camp Fee Schedule 2015



Camper's Name: _____	Grade: _____ Birth Date: _____	Sponsor's Name: _____	Date: _____
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Please Check Camp Week(s) Your Child Will Attend

Week(s)	6/8	6/15	6/22	6/29	7/6	7/13	7/20	7/27	8/3	8/10
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Youth XS Youth S Youth M Youth L Adult S Adult M
 Quantity: _____ X \$15 = _____

*Each camper receives a Camp Chesterbrook Academy bag upon registration.

REGISTRATION FORM

Camper Information

Camper's Name _____ Male Female
Address _____ City _____ State _____ Zip _____
Camper's Birth Date _____ Age on June 1st _____ Grade in the Fall _____
Parent/Guardian 1 _____ Male Female Home# _____ Cell# _____
Email Address _____ Employer _____ Business# _____
Parent/Guardian 2 _____ Male Female Home# _____ Cell# _____
Email Address _____ Employer _____ Business# _____
Child in custody of (Please check one) Both parents Mother Father Other (Specify) _____
Child lives with (Please check one) Both parents Mother Father Other Specify _____
Does your child know how to swim? Yes No Do you give permission for your child to swim in Camp Zone programs? Yes No
Do you give permission for your child to attend and participate in all activities on Camp Zone field trips? Yes No

Medical Information

Family Physician _____ Address _____ Phone# _____
Dentist/Orthodontist _____ Address _____ Phone# _____
Medical/Hospital Insurance Carrier (Note: Please submit a copy of insurance card) _____
Health History – (Mark all that apply & provide copies of all immunizations) Ear Infection Convulsions Asthma Bleeding/Clotting Disorder
Allergies Pollen Poison Oak/Ivy/Sumac Penicillin Insect Stings (List Type) _____ Foods (List Type) _____ Other (List Type) _____
Operations, serious injuries, diseases, or restrictions on physical activity: _____
Current medication and purpose (all medication sent to camp must be given to camp director and labelled clearly with doctor's instructions): _____
Behavioral conditions or problems of which camp staff should be aware _____

Child Release Authorization

In addition to Parent/Guardian names listed above, these person(s) have permission to pick up my child from Camp Zone. I understand that my child will not be allowed to leave with any person without authorization from Parent/Guardian, and that the person picking up my child will need to show identification.

Name: _____ Phone#: _____ Relation _____ DL# _____
Name: _____ Phone#: _____ Relation _____ DL# _____

Parent Authorization/Medical Release: The information provided is correct to the best of my knowledge, and the person described has my permission to engage in all prescribed camp activities, except if noted by me. In the case of sickness or accident, I hereby give permission to the medical personnel selected by the camp representatives to order x-rays, routine tests, treatment, dental work, and necessary transportation for the recipient at my expense. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp representative to secure and administer treatment, including hospitalization, for my child as named above. This form may be photocopied for use away from the main program site. I authorize the NLCI staff to apply sunscreen to my child's exposed skin on an as needed basis – if child needs assistance. All photos that are taken of my child may be used for promotional purposes.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

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