

### Mastermind Montessori School, Markham Fee Schedule

Days	Ages	Full Day	Half Day	Initials
<b>* July 3-6 (Week 1)</b>	15m – 2yrs	\$280	\$210	
	2.5 – 3yrs	\$270	\$200	
	3.5 – 6yrs	\$260	\$200	
<b>July 9-13 (Week 2)</b>	15m – 2yrs	\$350	\$250	
	2.5 – 3yrs	\$330	\$240	
	3.5 – 6yrs	\$320	\$230	
<b>July 16-20 (Week 3)</b>	15m – 2yrs	\$350	\$250	
	2.5 – 3yrs	\$330	\$240	
	3.5 – 6yrs	\$320	\$230	
<b>July 23-27 (Week 4)</b>	15m – 2yrs	\$350	\$250	
	2.5 – 3yrs	\$330	\$240	
	3.5 – 6yrs	\$320	\$230	

Days	Ages	Full Day	Half Day	Initials
<b>July 30-August 3 (Week 5)</b>	15m – 2yrs	\$350	\$250	
	2.5 – 3yrs	\$330	\$240	
	3.5 – 6yrs	\$320	\$230	
<b>*August 7-10 (Week 6)</b>	15m – 2yrs	\$280	\$210	
	2.5 – 3yrs	\$270	\$200	
	3.5 – 6yrs	\$260	\$200	
<b>August 13-17 (Week 7)</b>	15m – 2yrs	\$350	\$250	
	2.5 – 3yrs	\$330	\$240	
	3.5 – 6yrs	\$320	\$230	
<b>August 20-24 (Week 8)</b>	15m – 2yrs	\$ 350	\$ 250	
	2.5 – 3yrs	\$ 330	\$240	
	3.5 – 6yrs	\$ 320	\$230	

\* Four day week

Additional Fees		Initial
Lunch per week	\$40.00	
Before School (7:00 – 9:00 a.m.)	\$30.00	
After School (4:00 – 6:00 p.m.)	\$30.00	

School Hours	
Full Day	9:00 – 4:00 p.m.
Half Day, Morning	9:00 – 12:00p.m.
Half Day, Afternoon	1:00 – 4:00 p.m.

Note:

- This program is offered to children currently enrolled with Mastermind Montessori as well as to children not yet enrolled.
- To ensure registration, the attached application form must be signed and full payment for the week(s) of enrollment must be given.
- **A 5% discount** will be given to parents who register for the full 8 week program not including lunch and extended care.
- **A 5% sibling discount** will be given for a second child not including lunch and extended care .
- **A 5% discount** will be given to our current students not including lunch and extended care.
- **A 5% discount** will be given to parents who register before April 30, 2018.
- The total discount cannot exceed 15%.
- The above fees include 2 healthy snacks for full day students and one healthy snack for half day students.
- There will be an additional cost for the Farm Trip (Week 4).

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**Office Use Only:**

Payment received on:	Cheque Number:	Date on the cheque:	Total:
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## Activity Consent and Declaration

IN CONSIDERATION of **Mastermind Montessori Schools (“THE SCHOOL”)** accepting the application by

\_\_\_\_\_ (“**THE CAMPER**”) for registration in our summer program (“**THE CAMP**”), the undersigned parent(s) or Guardian(S) hereby agree:

1. The undersigned consent to the CAMPER participating in all regular and extracurricular camp activities, and such activities may include, without limiting the generality thereof, playground and other athletic activities as well as cultural and social activities. I/We agree to inform THE SCHOOL, prior to camp commencement, of any health issues that might restrict the CAMPER’s ability to participate in the selected program.
2. THE SCHOOL reserves the right to make such rules and regulations regarding the operation of the CAMP as it deems appropriate, and it is a condition of attendance that these rules and regulations, be observed .
3. The undersigned acknowledge the right of THE SCHOOL to decide unilaterally to suspend, discipline, or dismiss any CAMPER whose conduct is deemed unsatisfactory or whose influence does not serve the best interested of THE SCHOOL. Any such disciplinary decision shall be made in accordance with school procedure.
4. The undersigned acknowledge the prior and ongoing collection by THE SCHOOL of information regarding my/our child, including name, address, telephone number, health information, photographs, and similar items and I/We hereby agree to the use by THE SCHOOL of any of this information for appropriate educational purposes and for the purpose of information me/us about other programs and serves offered by THE SCHOOL.
5. If my/our child is accepted as CAMPER, I/We agree and understand that in the event of an accident or illness occurring to my/our child, THE SCHOOL will make every reasonable attempt to contact the undersigned. If, however, I/We cannot be reached I/We hereby give THE SCHOOL, its directors, officers, agents, and/or employees, the authority to act on my/our behalf in case of an emergency and to take appropriate steps to have a doctor or other medical personnel attend to my/our child.
6. Further, if my/Our child is accepted as a CAMPER, I/We agree to release and indemnify THE SCHOOL, its directors, officers, agents, employees and volunteers, from any and all claims for damages or other amounts arising directly or indirectly from any accident, illness, injury or any other reason as a result of the CAMPER’S participation in any camp activities. I/We hereby acknowledge that I/We have read and affirm the entire contents of this application and consent.

**I/We, the undersigned parent(s) or guardians(s), have executed this CAMP Application and Consent.**

\_\_\_\_\_  
Parent/Guardian Name Print

\_\_\_\_\_  
Parent/Guardian Name Print

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date