

MONTESSORI CHILDREN'S HOUSE OF PEORIA

MOVIEMAKING CAMP

Mon-Fri, June 20-July 1, 2011

Registration Form

Student's Name: _____ Age: _____

Name of Parent/Guardian: _____

Email: _____

If your child is a current MCHP student, you *do not* need to fill out the following portion.

Parent Address: _____

City/Zip: _____ Phone: _____

Emergency Contact: _____

Child can be released to: _____

How did you hear about Montessori Movie Camp? _____

Full payment or a \$50 deposit is requested to ensure your child's spot in the camp.

Enclosed: _____ \$50 deposit (balance to be paid by June 20)

or

_____ \$360 full camp cost

Parent/Guardian Signature

Date

Please return to the **Montessori School, 3601 N. North St., Peoria 61604**

Upon receipt of this form, a confirmation email will be sent to inform you of your child's spot in the camp. Space is limited to 10 students.