

2018 WESTMINSTER SUMMER PROGRAM REGISTRATION FORM (AGES 3*-7)

*Students must be potty-trained to attend



4114 ALLISON AVE
DES MOINES, IA 50310
www.westpres.org

Student's name _____

Parent/Guardian's name _____

Street address _____

City _____ Zip _____

Email address _____

Birthdate _____ Grade (fall 2018) _____ Male _____ Female _____

Allergies or Medical concerns* _____

*Please note that Westminster does not have a nurse on staff. Children must be medically self-sufficient during the 3-hour class.

Enroll in as many programs as you wish! Check the boxes for your choices!

<p>Fine Arts</p>  <p>Monday, June 4- Friday, June 8</p> <p>9:00-12:00</p> <p>Children will explore their creative sides through art, music, drama, dance and so much more.</p>	<p>Nature Explorers</p>  <p>Monday, June 11- Thursday, June 14</p> <p>*students and a parent are invited to meet the teachers at Neil Smith Wildlife Refuge on Friday, June 15</p> <p>8:30-12:00</p> <p>Children will enjoy daily trips to 4 area parks to learn about animals, plants and nature.</p>	<p>World Travelers</p>  <p>Thursdays 9:00-12:00</p> <p>June 21, & 28 July 5, & 12</p> <p>Hop in the airplane and join us as we "travel around the world" learning about different places through books, music, art, dramatic play and food!</p>	<p>Kids in the Kitchen</p>  <p>Thursdays 9:00-12:00</p> <p>July 26, August 2, 9, & 16</p> <p>Kids will be in the kitchen cooking up a storm as well as enjoy stories, art, and activities with food!</p>
<p>\$100 fee <input type="checkbox"/></p>	<p>\$95 fee <input type="checkbox"/></p>	<p>\$85 fee <input type="checkbox"/></p>	<p>\$85 fee <input type="checkbox"/></p>

Please return this form, along with your fee to:
Westminster Presbyterian Main Office on the second floor or mail it to us at the address at the top of the page.
For more information, please contact Director Megan Seifert at 274-1534 or preschoolmegan@gmail.com

Rolling River Rampage Vacation Bible School is July 16-20. For more information or to enroll, please stop by the main office.

For Office Use Only

Date: _____ Time: _____ By: _____
Payment method: \$ Check CC online