



The International School
of Choueifat - Choueifat



Dear Parents,

We are happy to announce that the Summer Day Camp will begin on July 10, 2017. Students enroll in either the six-week summer program or the four-week program or two-week program, five days a week from Monday to Friday.

Participants will be divided into age groups and each group will have its own schedule of activities and outings.

A typical Monday, Wednesday and Friday will be divided into four to five sessions which will include in-school activities such as football, basketball, taekwondo, kickball, badminton, computer, table tennis, dancing, gymnastics, fun games, field games, theatre, car track, face painting, arts & crafts, softball, puppet show, board games, movies, storytelling, volleyball, tennis, Math and Science games, treasure hunt, dodge ball and picnics. **Lunch is included.**

An exciting line-up of fun and educational outings has been scheduled on Tuesdays and Thursdays from 10:30 a.m. to 5:00 p.m. These may include visits to tourist sites, summer resorts, scuba diving for certain age groups, mountain activities, amusement parks, bowling, laser tag, water activities...etc. Lunch is included.

Fees will depend on the options and duration of the program. The options are as follows and the related fees are on the registration form:

Summer Day Camp (open to all SABIS[®] and non-SABIS[®] students)

10:30 a.m. – 3:30 p.m. (Mon, Wed, Fri),

10:30 a.m. to 5:00 p.m. (Tue & Thu).

Summer Day Camp plus English Course (open to all SABIS[®] and non-SABIS[®] students)

English Class: 8:00 a.m. - 10:00 a.m. (Monday to Friday) plus the Summer Day Camp hours (as above)

Summer Day Camp (half package) plus Summer School (open to SABIS[®] students only)

Summer school: 8:00 a.m. -12:30 p.m.

Plus Summer Day Camp hours starting 12:50 p.m. (Mon, Wed, Fri)

Registration is open until July 3, 2017 for all students from age 3-15 years. Fees cover the cost of lunch, insurance, sessions and outings.

Transport will be provided to and from school for an extra fee.

Kind Regards,

Administration

For more information:

ISC-Choueifat: +961 5 430 430



Registration Form

First Name: _____ Family Name: _____

Date of Birth: _____ School Name: _____

Class	Section

Address

District: _____ Street: _____

Building: _____ Floor: _____

E-mail:

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Contact Information

Parent's/Guardian's Name: _____ Phone: _____

Emergency Contact Person: _____ Phone: _____
(Name and Relation)

Choice

Tick the option of your choice

<input type="checkbox"/>	4 weeks : July 10 to August 4
<input type="checkbox"/>	4 weeks : July 24 to August 18
<input type="checkbox"/>	6 weeks : July 10 to August 18

	4 weeks	6 weeks	Additional 2 weeks
Option 1: Summer Day Camp	\$605	\$770	\$235
Option 2: Summer Day Camp + English Course	\$780	\$1035	\$330
Option 3: Summer Day Camp <i>(half package for summer school students)</i>		\$335	

Transportation

Tick the option of your choice

<input type="checkbox"/>	Private Transport
<input type="checkbox"/>	School Transport

Conditions

		<i>For school transport only</i>	4 weeks	6 weeks	<i>Add 2 weeks</i>
	Zone 1	Choueifat	\$ 125	\$ 150	\$50
	Zone 2	Khaldeh, Deir Koubel, Doha, Bichamoun & Suburbs	\$ 150	\$ 185	\$65
	Zone 3	Beirut, mountains	\$ 175	\$ 220	\$80

Swimming

Tick the appropriate box

<input type="checkbox"/>	My child knows how to swim
<input type="checkbox"/>	My child does not know how to swim

For more information:

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Medical: Kindly detail any medical conditions or food allergies that your child may have.

Parent's/Guardian's Name: _____ **Signature:** _____

Please complete in this form and return to the school accountant's office during the period of registration, along with:

- Two recent passport size pictures
- Photocopy of participant's identification document (*for non Choueifat students*)
- Full Payment in cash or in check (*written to the order of: "The International School of Choueifat"*)

Conditions of Admission

I, the undersigned parent/guardian, hereby register my son(s)/daughter(s), whose name appears below, in the school's Summer Day Camp 2017. In doing so, I acknowledge that I have read and agreed to each of the following conditions of admission:

1. **Refund Policy:** The full amount must be paid in advance. Should the student choose not to attend for some reason, fees will not be refunded.
2. **Health:** In the event of a medical or surgical emergency, I the student's parent/guardian hereby give permission to the physician, selected by the school, to secure proper treatment, (including hospitalization if necessary), for the student named below. I understand that the school will make all reasonable efforts to contact me should an emergency arise.
3. **Waivers of Liability:** I understand and acknowledge that certain activities have an increased risk of injury associated with them. I hereby release and agree to indemnify and hold harmless the school along with its staff and representatives from any or all losses.
4. **Refusal of Application:** The Summer Day Camp administration reserves the right to refuse admission to any applicant, based on its own sole discretion and based on history of discipline or medical condition(s), without having to provide any justification or explanation thereafter.
5. **Photographs:** Pictures will be taken during the camp of students in the different activities. Sometimes these photos are published in SABIS® newsletter, yearbooks, and other publications.

Do we have your permission to use photos of your child for such publications? Yes No

Student's Name:

Parent's/Guardian's Name:

Date:.....

Signature: