



St. Hugh Catholic School Summer Program 2018

Monday, June 11th
thru
Friday, July 6th

No Class Wednesday, July 4th

Pre-K3 thru 5th Grade

Academics Program

Half Day Only - 8:00 am to 12:00 pm

\$600.00 for 4 weeks

10% discount for siblings

Registration fee \$120.00 per child
(Non-Refundable)

Please return forms and fees by Friday, June 8th, 2018

For more information contact Ms. Valerie Perez at vperez@st-hugh.org

Mission Statement

We will foster an environment and a unique opportunity for children to learn valuable skills and make new friends through programs that are challenging, educational, and fun.

Statement of beliefs and objectives:

- We believe that our program provides an opportunity for academic enhancement, personal growth, increased self-esteem, and friendship building.
- We hope to create a space for young people to learn to work as a group while gaining confidence in their unique abilities as individuals.
- To instill the lifelong values of teamwork and individual responsibility through daily tasks in a healthy environment.



Programs offered: Academic Programs and summer school 8:00 am – 12:00 pm

- Pre-K3, Pre-K4
- Academic Enrichment (Grades K-5)
Math/Reading
- Academic Remediation (Grades K-5)
- Computer Application and Skills (Grades 3-5)



Programming Concepts
Computational Thinking

Special and Fun Days

- Dress up days
- Water day
- Daily Snack/Recess with fun activities

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My child will be attending the following program:

All programs are from 8:00 am – 12:00 pm

_____ 3K/4K Program (10 spots)

Ms. Perez/Mrs. Herrera

_____ Kinder-2nd Grade Math/Reading Program (10 spots)

Ms. Capablanca/Ms. Flores

_____ 3rd - 5th Grade Math/Computer Application Skills/Reading Program (10 spots)

Mr. Suarez/Mr. Perez

Behavior Rules Contract:

Since each child is unique and valuable in God's sight, each will be treated with love, respect, and concern. However, there are certain behaviors that are expected of all students. St. Hugh School reserves the right to ask a student not to return, no refunds given, if he/she is not in compliance with any of the following rules:

- 1.No student is to leave the supervised area.
- 2.Foul or abusive language or profanity will not be tolerated.
- 3.Physical violence in any form such as biting, pinching, hitting, pushing, or kicking will not be tolerated.
- 4.Bullying of any form will not be tolerated.
- 5.Disrespect towards any staff member will not be tolerated.

Student Name _____

Parent Signature _____

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Child's Name _____ Grade entering _____ Primary Phone _____
Last First Middle Initial

Preferred Name _____ Sex : M _____ F _____ Birthdate _____

Child's Address _____ City _____ State _____ Zip Code _____

Mother/Guardian's Name _____ Cell Phone _____

Address _____ City _____ State _____ Zip Code _____

Mother's Email _____ Work # _____ Home # _____

Father/ Guardian's Name _____ Cell Phone _____

Address _____ City _____ State _____ Zip Code _____

Father's Email _____ Work # _____ Home # _____

Child's Physician _____ Phone # _____

May the school contact another physician if unable to contact above? Yes _____ No _____

Other persons to be notified in case of illness or accident:

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Persons **permitted** to pick up child from school other than above:

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Medical Information about your child: Please list all medical alerts or allergies.

Parent/Guardian Signature _____

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Additional persons permitted to pick up child from school:

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____