

Farm

SUMMER DAY CAMP

June 23- Aug 1
 Ages: 4 - 5 years
 6 - 9 years
 8:30 AM - 1:00 PM

Activities will include:

- Animal care & farm work
- Herb and nature walks
- Cooking, baking, crafts
- Wool-carding/felting, weaving
- Beeswax & clay-modeling
- Stories, plays, puppet-making
- Games, music, singing



\$225 per week

- I. JUNE 23- JUNE 27
- II. JUNE 30- JULY 4
- III. JULY 7 - JULY 11
- IV. JULY 14- JULY 18
- V. JULY 21- JULY 25
- VI. JULY 28 - AUG 1

Early registration guarantees your place -
 Farm Camp fills up fast!

After-Care: Monday-Friday 1-3:30PM
 Pre-registration Only • \$15/day

707.575.7194

FARMCAMP: extension370

Summerfield WALDORF SCHOOL & FARM

Farm Camp After-Care fees NON-REFUNDABLE and due May 1, 2008. Send form w/ full payment to:

SWS FARM CAMP, 655 WILLOWSIDE ROAD, SANTA ROSA, CA 95401

	M	T	W	TH	F	Total
1. Check all days After-Care is needed.	6/23-6/27	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2. Total # of days @ \$15per day.	6/30-7/4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3. Enter amount on Total Due.	7/7-7/11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4. Send payment by May 1, 2008.	7/14-7/18	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
TOTAL DUE \$	7/21-7/25	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	7/28-8/1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

CHILD _____ AGE _____ PHONE _____ SWS STUDENT Yes No

PARENT NAME & ADDRESS _____

Office use: Chk # _____	Ck. Amt. _____	Cash _____	Rec. by _____	Date _____
CC# _____	Exp. _____	Chg. Amt. _____		

Farm Camp fees NON-REFUNDABLE and due April 4, 2008. Send registration form w/ full payment to:

SWS FARM CAMP, 655 WILLOWSIDERD, SANTA ROSA, CA 95401 FOR: # of weeks _____ Total due is _____

CHILD _____ DOB _____ AGE on JUNE 1 _____ SWS Student? Yes No

WEEKS REQUESTED 6/23-6/27 6/30-7/4 7/7-7/11 7/14-7/18 7/21-7/25 7/28-8/1

PARENT'S NAME _____ PHONE: Day _____ Eve _____

PARENT'S ADDRESS _____ Zip _____

Office use: Chk # _____	Ck. Amt. _____	Cash _____	Rec. by _____	Date _____
CC# _____	Exp. _____	Chg. Amt. _____		