

Horizons 2008 Summer Registration Form



Child's Name: _____ Parent's Name: _____
Address: _____ Home Phone: _____
_____ Work/Cell Phone: _____
Birth date: _____ Email: _____
School/Grade/Program: _____

Once your registration is received you will be charged immediately for the sessions that you register for. You may make tuition payments using PayPal, VISA, MasterCard, or check.

Mark the session(s) for which you wish to register:

Summer Fun CAMPS Sessions

7 Weeks from June 23-July 17 & July 28-August 14 (No week of July 21-24)

____ June 23-26: Blast Off Into Summer

____ 9-12pm for Ages 4-7 ____ 1-4pm for Ages 8-12

____ June 30-July 3: Under the Big Top

____ 9-12pm for Ages 4-7 ____ 1-4pm for Ages 8-12

____ July 7-10: Down on the Farm

____ 9-12pm for Ages 4-7 ____ 1-4pm for Ages 8-12

____ July 14-17: Adventures in the Great Outdoors

____ 9-12pm for Ages 4-7 ____ 1-4pm for Ages 8-12

____ July 28-31: Let's Experiment

____ 9-12pm for Ages 4-7 ____ 1-4pm for Ages 8-12

____ August 4-7: Pirates of the High Seas

____ 9-12pm for Ages 4-7 ____ 1-4pm for Ages 8-12

____ August 11-14: Wet N Wild

____ 9-12pm for Ages 4-7 ____ 1-4pm for Ages 8-12

Horizons Developmental Remediation Center
3120 68th Street SE * Caledonia, MI 49316
(616) 698-0306 * info@horizonsdrc.com
www.horizonsdrc.com

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Collaborate and Create!

Two 3-week Sessions on Tuesday & Thursday's from June 24-July 10 & July 29-August 14
(No weeks of July 14-17 & July 21-25)

____ Creative Thinking Under Construction: June 24-July 10: Tuesdays & Thursdays 1-4pm

____ Environmental Experiences: July 29-August 14: Tuesdays & Thursdays 1-4pm

Individualized Instruction

7 Weeks from June 23-August 14 (No week of July 21-24)

____ Mondays: ____ 9-12 ____ 1-4 ____ 9-4

____ Tuesdays: ____ 9-12 ____ 1-4 ____ 9-4

____ Wednesdays: ____ 9-12 ____ 1-4 ____ 9-4

____ Thursdays: ____ 9-12 ____ 1-4 ____ 9-4

Cluster Coaching Program—Introduction Session

4 Months from July-October

____ Monday Evenings from 6:30-8pm: 7/21, 8/4, 8/18, 9/8, 9/22, 10/6, 10/20, 10/27

____ Wednesday Mornings from 9:30-11am: 7/16, 7/30, 8/13, 8/27, 9/10, 9/24, 10/8, 10/22

Cluster Coaching Program—Feeding Session

4 Months from July-October

____ Thursday Afternoons from 3-4:30pm: 7/17, 7/31, 8/14, 8/28, 9/11, 9/25, 10/9, 10/23

If you wish to register for the following services a clinician will call you to schedule:

____ Individual Speech Therapy

____ Individual Feeding Therapy

Final Registration—May 30, 2008

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