



Academic “Sharpen Our Skills” (SOS) Summer School

Can your child benefit from some extra coaching in math or language arts? Help her or him keep the knowledge fresh and learn even more skills over the summer. “SOS” School is for (incoming) 1st-8th graders and is designed to:

- Maintain and reinforce basic grade-level skills
- Teach critical “school survival” skills like using a calculator, or how to use a multiplication table
- Incorporate study skills within lessons

Ascension, St. Helen, and Immaculate Conception Schools are joining again with the Catholic Education Collaborative to provide an academic summer school program at Immaculate Conception School. Instructors are licensed teachers from participating schools.



DATES:

Wednesday, July 6—Friday, July 9
Monday, July 11—Thursday, July 14
Monday, July 18—Thursday, July 21
Monday, July 25—Thursday, July 28

TIME: 8:30-11:30 a.m.

LOCATION: Immaculate Conception School
2268 S. Smithville Rd.

Cost/Registration Information

Cost is \$240 for the 4-week session. One-half (\$120) must be paid by Friday, May 6; the balance (\$120) is due by Tuesday, May 31. There are no scholarships available this year, but payment plans can be arranged. Classes will be filled on a first come basis.

Questions? Contact your school Principal or Sue Koverman at the CEC, 223-1331x5033 or skoverman@cecd Dayton.org.

Make checks or money orders payable to **Catholic Education Collaborative** and mail with registration forms to

Summer School Registration
Catholic Education Collaborative
1436 Needmore Road
Dayton, OH 45414



**East Dayton Academic Summer School
2011 Registration and Waiver**

Child's Full Name: _____ Nickname/goes by: _____

Address: _____

Child's age: _____ Grade (Fall '11) _____ School attending (Fall '11) _____

Current School Attending _____ Teacher _____

Parent/Guardian Contact information

Mother/Guardian (circle one)

Print name

Complete Address: _____

Daytime phone: _____ Eve. phone: _____ Email: _____

Father/Guardian (circle one)

Print name

Complete Address: _____

Daytime phone: _____ Eve. phone: _____ Email: _____

In case of emergency contact:

Name: _____ Relationship to child _____

Primary daytime phone: _____ Alternate daytime phone: _____

WAIVER

On behalf of my child, my family, and myself, I hereby assume all risks in connection with attendance at the East Dayton Summer School program. I further release the Archdiocese of Cincinnati, the Archbishop, employees, and volunteers from all claims, judgments, and liability for any injury or damage due to my child's participation in the program, including all risks connected therewith, whether foreseen or unforeseen. Furthermore, I acknowledge that it is my responsibility to provide adequate health insurance for my child.

I understand that parents/guardians are responsible for the transportation of their children to and from summer school, and that all students must vacate the school premises by noon. No child will be dismissed early, or into the custody of any adult other than legal guardians, without written permission.

Parent/Guardian Signature

Date