



Honey Bear Montessori Summer Reservation 2019



Child's Name _____

Date of Birth _____

Please mark the dates needed for Summer 2019 on these calendar pages and turn in with your child's registration form.

For consistency for you child: for any month that you are reserving, a minimum of 8 days is recommended for each month.

My child and I are aware that in the event of damage to school property or classroom materials, I will reimburse Honey Bear Montessori LLC for replacement or repair of said property, whichever Honey Bear Montessori LLC, deems appropriate.

Parent or Guardian Signature _____

2019

JUNE

please select one below: Full Day (8:45- 3:00) Extended day (7:30-5:30)

Monday	Tuesday	Wednesday	Thursday	Friday
27	28	29	30	31
03	04 Last Day of School	05 No School	06 No School	07 No School
10 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	11 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	12 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	13 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	14 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day
17 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	18 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	19 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	20 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	21 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day
24 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	25 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	26 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	27 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	28 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day

2019

JULY

please select one below: Full Day (8:45- 3:00) Extended day (7:30-5:30)

Monday	Tuesday	Wednesday	Thursday	Friday
01 No School	02 No School	03 No School	04 No School	05 No School
08 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	09 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	10 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	11 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	12 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day
15 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	16 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	17 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	18 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	19 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day
22 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	23 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	24 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	25 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	26 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day
29 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	30 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	31 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	01	02

2019

AUGUST

please select one below: Full Day (8:45- 3:00) Extended day (7:30-5:30)

Monday	Tuesday	Wednesday	Thursday	Friday
29	30	31	01 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	02 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day
05 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	06 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	07 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	08 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	09 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day
12 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	13 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	14 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	15 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	16 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day
19 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	20 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	21 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	22 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day	23 <input type="checkbox"/> Full Day <input type="checkbox"/> Extended Day
26 No School	27 No School	28 No School	29 No School	30 No School