

**Roseland Board of Education  
Lester C. Noecker School  
Robyn P. Greenwald, Principal**

100 Passaic Avenue  
Roseland, New Jersey 07068  
(973) 226-7644, ext. 314



April 3, 2019

Dear Parents/Guardians:

I am pleased to share with you that the Lester C. Noecker School offers a Summer Enrichment program for children eligible to enter Kindergarten in September 2019. The summer program is not mandatory, but affords your child an opportunity to meet his/her classmates, become familiar with the school, and learn routines associated within the Kindergarten classroom environment.

The Kindergarten Summer Enrichment program is open only to children eligible to enter Kindergarten in September 2019. Kindly note that your child must be 5 years old by October 1, 2019.

The children will enjoy many stimulating and exciting activities planned to meet their developmental stages of learning. They will participate in language arts, science, creative dramatics, social studies, art, music, and math activities. Physical and social activities will also be an integral part of our program. Thematic units will be covered each week, such as *Friends*, *Feelings*, and *Vacations*. This class will give the children the opportunity to learn activities, and to participate in group situations.

A daily schedule will be established for discussion periods, early learning activities, stories, poetry, games, and sharing. Outside play time will take place each day, weather permitting.

Students will also have the chance to experience a short bus ride around town and take a tour of the building. A date will be forthcoming, at which time you will be notified. During the summer programs, children remain in the class for the entire three hours. While the program is not mandatory, this offering is highly recommended for those entering Kindergarten in September 2019.

Please complete and send the attached form along with payment to Mrs. Catherine Overbeck in the Board Office of the Lester C. Noecker School by Friday, May 3, 2019. Thank you, and we look forward to a wonderful July with your child!

Very truly yours,

*Robyn Greenwald*

Ms. Robyn P. Greenwald  
Principal

## Course Description

Schedule: July 1 – July 26, 2019 -- Class meets 9:00 AM - 12:00 Noon - (19 days).  
July 4, 2019- not in session

Teachers: All teachers are New Jersey certified teachers.

Transportation: Parents/Guardians responsibility. Carpooling is suggested.

Tuition: \$300.00 for the first child and \$275.00 for each additional child.

Please post date your check for July 1, 2019 payable to the Roseland Board of Education.

If you have an older child participating in the Grade 1-6 enrichment program, please submit separate checks.

There will be a \$20.00 fee charged for insufficient funds. A cash payment will then be required.

No refunds will be offered after June 1, 2019.

Deadline: Friday, May 3, 2019

# 2019 KINDERGARTEN SUMMER SCHOOL REGISTRATION FORM

JULY 1, 2019 – JULY 26, 2019

Please return this form and a check for \$300.00, for the first child and \$275.00 for each additional Kindergarten child post dated July 1, 2019 payable to the Roseland Board of Education to Mrs. Overbeck in the board office of the Lester C. Noecker School. *The deadline is Friday, May 3, 2019.*

**PLEASE WRITE SEPARATE CHECKS FOR THE KINDERGARTEN PROGRAM AND THE GRADE 1-6 PROGRAM.**

**HEALTH INFORMATION AND EMERGENCY CALL NUMBERS -- FOR SUMMER SCHOOL ONLY**

PLEASE PRINT ALL INFORMATION

Child's Name \_\_\_\_\_ Home phone \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Cell phone \_\_\_\_\_

Parent/Guardian Alternate \_\_\_\_\_ Cell phone \_\_\_\_\_

In the event we are unable to reach you, please list below a neighbor or nearby relative to be called in case of emergency.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Physician's Name \_\_\_\_\_ Phone \_\_\_\_\_

Do we have permission to take your child to the hospital if we are unable to reach you? Yes \_\_\_\_\_ No \_\_\_\_\_

Please answer the following questions concerning your child's general health:

1. Is your child allergic to bee stings or other insect bites? If so, please comment: \_\_\_\_\_

\_\_\_\_\_

2. Does your child have any other allergies, including food allergies? \_\_\_\_\_

\_\_\_\_\_

3. If there is anything further we should be aware of concerning your child's general health, please explain:

\_\_\_\_\_

4. Medications, if any: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

***For office use only:***

Date Received \_\_\_\_\_

Check # \_\_\_\_\_

**Check is postdated July 1, 2019**