

**ACT ENRICHMENT'S  
AFTER SCHOOL ENRICHMENT PROGRAM  
at  
PLYMOUTH ELEMENTARY  
SEPTEMBER 26, 2017**

**CLAY**  
Lindy Cook  
on Tuesdays



Four 90-Minute Classes

Time: 2:00-3:00

Grades: 4-6

**Room:**

Dates: 9/26, 10/3, 10/17, 10/24

Have fun learning the basics of working with different clay techniques and create a variety of projects that will be fired and glazed. All the activities in this class can be used for Girl Scout Badge.

Register early - Maximum 20 students!

Registration form on back of this  
flyer  
QUESTIONS? Call Misty diVittorio  
530-622-3953

# Registration Information

**Student is enrolled in the class unless otherwise notified.**

**Registration forms are due September 20, 2017**

Students may hand in their forms to their teachers or directly to the school office.

Parents are responsible for transportation from class. **Young children not going to ELP must be picked up from the classroom and sign their child out** unless parents make other arrangements with the teacher. (See form below)

**ACT Enrichment is on campus the first week of the session and for the first day every class to insure that your child knows where to go to class. Please help us by making sure each week your child remembers he or she has class.**

Questions? Call Misty diVittorio (530) 622-3953 or E-Mail: [misty@actenrichment.com](mailto:misty@actenrichment.com)

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## Plymouth Elementary Clay Registration Form

**Due with payment no later than Wednesday, September 20, 2017**

Child's Name \_\_\_\_\_ Parent's Name \_\_\_\_\_

Phone(Home)(\_\_\_\_) \_\_\_\_\_ (Work)(\_\_\_\_) \_\_\_\_\_ (Other)(\_\_\_\_) \_\_\_\_\_

School Teacher \_\_\_\_\_ Grade \_\_\_\_\_ E-Mail \_\_\_\_\_

**(Please use a separate registration form for each child. They are available in the school office.)**

**Please indicate which of these applies to you and your child:**

\_\_\_\_ My child is enrolled in ELP.

\_\_\_\_ I will pick him/her up in the classroom.

\_\_\_\_ My child has permission to walk home (Available to 4<sup>th</sup> - 6<sup>th</sup> graders only)

\_\_\_\_ My child/children will be brought or be picked up by the following friend or day care provider listed on student's emergency card:

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Name

Relationship to Student

Phone Number

Parent's Signature: \_\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_

**Make separate checks for each class, payable to ENRICHMENT PROGRAM**

Please add \$5 late fee if class has started.

Please note: NO REFUNDS (unless minimum enrollment is not met)