



BOSMMA

Summer Camp 2026

OPEN TO KIDS AGES 3 -12 years

Eight Weeks Available: June 22nd - August 14th

8:30 AM - 3:30 PM \$270 per week

Week 2 and Week 3 are only \$220 per week

WEEKLY THEMES

WEEK 1 - JUNE 22nd-26th: SHAKE, RATTLE, AND ROLL!

Children will explore music, rhythm, and movement through dancing, singing, instruments, and group games that support coordination, listening skills, and self-expression.

***WEEK 2 - JUNE 29th- JULY 2nd: PRINCESS CROWNS AND PIRATE TOWNS**

A week filled with imagination and adventure! Campers will enjoy themed stories, creative play, crafts, and games as they sail pirate ships and explore royal kingdoms.

***WEEK 3 - JULY 7th-10th: AROUND THE MIDDLE EAST**

Children will be introduced to Middle Eastern culture through music, art, stories, traditions, and hands-on activities that celebrate diversity and global awareness.

WEEK 4 - JULY 13th-17th: CAMP INVENTION

See separate flyer for more information. Available for children in grades K - 6th

WEEK 4 - JULY 13th-17th: CURIOUS KIDS LAB

Get ready for hands-on fun and learning! Little explorers will engage in exciting experiments and discover scientific concepts through interactive activities. It's a week of play, curiosity, and learning as we explore the world around us in fun and creative ways!

WEEK 5 - JULY 20th-24th: SPLISH SPLASH DISCOVERY

Campers will explore oceans, lakes, and ponds while learning about the animals, plants, and environments found in and around water through fun, interactive activities.

WEEK 6 - JULY 27th-31st: JINGLE ALL THE WAY...IN JULY

Celebrate the holiday season summer-style with festive crafts, music, games, and cheerful activities—bringing holiday joy without the winter chill!

WEEK 7 - AUGUST 3rd-7th: KIDS IN THE KITCHEN

Children will explore cooking and food preparation through hands-on, age-appropriate activities that introduce basic kitchen skills, healthy foods, and simple recipes while building independence and confidence.

WEEK 8 - AUGUST 10th-14th: LITTLE ARTISTS AT WORK

A creative week focused on painting, building, and hands-on art projects where children can explore colors, textures, and materials while expressing their creativity.



Camp Invention®

SPARK SUMMER FUN AT CAMP INVENTION

Led by qualified local educators, Camp Invention® is a fun-filled summer adventure designed to ignite your child's imagination and boost their confidence! Explore this year's all-new program where campers team up with friends to tackle fun, hands-on STEM challenges and bring their big ideas to life!



SAVE \$30

WITH CODE **GIFT30**

EXPIRES DEC. 31, 2025

SAVE \$25

WITH CODE **FUN25**

EXPIRES MARCH 31, 2026

SAVE \$20

WITH CODE **FUN20**

EXPIRES APRIL 28, 2026

SAVE \$30

WITH CODE **SIBLOVE30**

FOR 2 SIBLINGS

SAVE \$40

WITH CODE **SIBLOVE40**

FOR 3 OR MORE SIBLINGS

SECURE YOUR SPOT TODAY!

Discounts cannot be combined

Grades: Rising K - 6th

Campers are grouped by grade

Location: Basilica of St. Mary Montessori Academy

18200 Merriman Road, Livonia, MI 48152

Dates & Time: July 13 - 17, 2026 | 9:00 AM to 3:00 PM

Cost: \$335 (before discount)

Payment Plans Available up until 5/14/2026

Camp Director: Abeer Samaan | info@stmarymontessori.com

If these dates/times don't work for you, please visit invent.org/cisave for other locations near you.

REGISTER HERE!

Camp Invention is a nonprofit program of the National Inventors Hall of Fame.

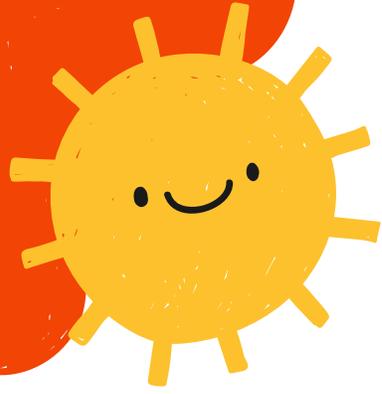
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Investors in Creativity and Invention

Army Educational Outreach Program
General Motors
Nordson Corporation Foundation
Overdeck Family Foundation

The Red Backpack Foundation by Sara Blakely
Shurtape Technologies, LLC
U.S. Department of Defense (DoD) STEM
Walton Family Foundation
The Weissman Family Charitable Fund



Summer Program Enrollment Form 2026

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Child's Name _____ Date of Birth _____ Gender _____

Address _____

Primary Guardian Contact _____ Relationship _____

Phone # _____ Email _____

Secondary Guardian Contact _____ Relationship _____

Phone # _____ Email _____

Person other than parent to be notified in an emergency if a parent is not available:

Name _____ Relationship _____ Phone # _____

Physician's Name _____ Phone # _____

Please list any special health concerns: _____

Please list any allergies and/or foods which should not be eaten

Classroom Selection (One application per child)

_____ Preschool (3 - 5 years) _____ School age (6 - 12 years)

Summer Sessions and Themes:

_____ Week 1 June 22nd - June 26th: Shake, Rattle, and Roll!

_____ *Week 2: June 29th- July 2nd: Princess Crowns and Pirate Towns

_____ *Week 3: July 7th-10th: Around the Middle East

_____ **Week 4 July 13th-17th: CAMP INVENTION (Grades K-6, Please see attached flyer)**

_____ Week 4: July 13th-17th: CURIOUS KIDS LAB

_____ Week 5: July 20th-24th: Splish Splash Discovery

_____ Week 6: July 27th-31st: Jingle All the Way...In July

_____ Week 7: August 3rd-7th: Kids in the Kitchen

_____ Week 8: August 10th-14th: Little Artists at Work

Pizza Friday (includes pizza, fruit, and vegetable)

_____ \$6 one slice of pizza per week _____ \$7 two slice of pizza per week

Extended-care till 4:30pm (Additional Cost \$9/hour) _____

Payment: Credit Card (3% fee) _____ Bank (1% fee) _____ Cash _____ Check (Payable to BOSMMA) _____

Full payment is required by May 29, 2026.

The Basilica of Saint Mary Montessori Academy
18200 Merriman Rd. Livonia, MI 48152
Visit: www.stmarymontessori.com
or Call 734-743-5601

RELEASE AND STATEMENT AGREEMENT

Child's Name _____

___ **ENROLLMENT FEE:** A summer enrollment fee of \$35 is required with this application to reserve your child's spot. This fee is non-refundable.

___ **PAYMENT AGREEMENT:** I understand that children enrolled for complete weeks and that my agreement to pay charges for each full week is not subject to adjustment for illness or absence. I agree to pay, when applicable, other fees. These may include registration, hourly daycare, or late pickup charges. I understand that my child may be denied admission to camp if tuition or fees are not paid in a timely manner.

___ **LATE PICKUP CHARGES:** Late pickups will be charged \$1 per minute.

___ **MEDICAL RELEASE:** I do hereby grant permission to BOSMMA Summer Camp to secure such medical aid and hospital service as the employees of BOSMMA deem necessary for my child in the event he/she should sustain an injury or illness while attending camp. I understand that a body temperature of 100 degrees or more will require me to immediately pick up my child from camp.

___ **MEDIA RELEASE:** I acknowledge that my child might be photographed while participating in camp activities and that these photos may be used by BOSMMA for the promotion and marketing of BOSMMA Summer Camp. I understand that it is my responsibility to notify BOSMMA, in writing, if I do not wish to have my child photographed.

___ **ILLNESS:** To protect all children, your child will not be accepted at the center if he/she has any of the following symptoms: a fever, a rash or eye infection that has not been diagnosed, or any diarrhea or vomiting. Children must be fever-free and vomit-free for 24 hours before returning to school. If your child develops any of the above symptoms while in the center, he/she will be isolated from the other children, parents will be contacted by phone, and the child must be picked up within one hour of that phone call.

___ **AUTHORIZATION FOR SUNSCREEN:** I give permission to BOSMMA to apply sunscreen cream which I provided for my child as necessary during the day. The sunscreen must be labeled with the child's name and placed in a Ziplock® bag.

___ **LUNCH / SUPPLIES AGREEMENT:** I agree to provide food and drinks for my child. I agree to provide extra clothes and socks, wipes, and any other supplies my child may need while in care. BOSMMA will not be responsible for damaged or missing personal possessions. Pizza Friday lunch is available for \$6/week (1 slice) or \$7/week (2 slices).

I HAVE READ THE REGISTRATION MATERIALS IN FULL AND AGREE TO THE ABOVE STATED AUTHORIZATIONS. I ACCEPT RESPONSIBILITY FOR THIS CHILD'S FULL TUITION AND UNDERSTAND THAT ALL CAMP FEES MUST BE PAID IN ADVANCE.

Parent / Guardian Name _____

Parent / Guardian Signature _____ Date _____

For Office Use Only:

Date received _____ Paid \$ _____ Check # _____ Cash _____ Quickbooks _____

Child Record Form Received _____ Registration Form Received _____