

# St. Anne Summer School 2024

presents... "The Body"



Dear Parents:

St. Anne School is offering a summer program for students entering kindergarten through sixth grade. This year's program will begin June 10 and end July 5. The summer school instructional day will run from 8:30 a.m. – 1:00 p.m. In an attempt to meet the various needs of families, we are offering an afternoon program following the 1:00 p.m. dismissal time. The full-day program will operate from 8:00 a.m. – 5:00 p.m. Our schoolyard will be open and supervised beginning at 8:00 a.m. each morning. Since there is no supervision prior to 8:00 a.m. and for the students' safety, I would like to ask that no student be dropped off before that time. If your child is ill or will be late, please be sure to call the school office by 9:00 a.m. at 664-7977. The morning bell will ring at 8:30 a.m. Students will line up at that time. For students signed up for the morning program only, their day will conclude at 1:00 p.m. Parents of students leaving at 1:00 p.m. are asked to please be sure to pick up your child(ren) promptly at 1:00 p.m. Students involved in the full-day program will go out to the yard at 1:00 p.m. and eat lunch. Following lunch, students will continue on with our afternoon activities. Our full-day students' day will end promptly at 5:00 p.m. Parents should enter through th/e school's main front doors on 14<sup>th</sup> Ave. to pick up children. As is the case with our extended care program during the regular school year, a late fee of \$2.00 per minute per child will apply for parents arriving after 5:00 p.m.

The academic program will review and emphasize basic skill development in language arts, math, and science. This summer program is intended to enrich as well as support skills students have been or will be working on in school. A variety of activities and approaches to learning will be used to keep the learning exciting.

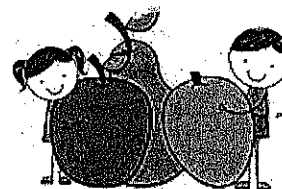
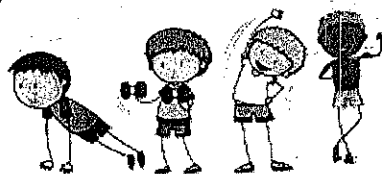
Our theme this summer is "The Body." The students will be studying about how our body works, nutrition, exercise and many more exciting things. Many of the classroom activities, readings, and projects will involve stories, information, and facts about those areas of interest. The students will be taking a few local field trips to expand each child's experiences. The specific dates of the field trips will be noted on the summer calendar that will be handed out the first day of summer school. Please note that we will not be sending any follow-up communications to parents once we have received your summer school application and fee. On the first day of summer school, students will gather in the yard and when the bell rings at 8:30, they will line up in an assigned area for their grade level.

Please fill out the attached summer school application and return it along with the summer school fee to the school office by May 31, 2024 at the latest. It has been our experience that classes do fill up very quickly so it is recommended that in order to ensure a space in the program, you should return this application **as soon as possible**.

If you have any questions, please call the school at (415) 664-7977.

Sincerely,

Thomas C. White  
Principal



KIDS NUTRITION

**ST. ANNE SUMMER SCHOOL APPLICATION**  
1320 14<sup>th</sup> Avenue San Francisco, CA 94122 (415) 664-7977 [www.stanne.com](http://www.stanne.com)

**PLEASE CHECK CHOICE OF SESSION**  
Gates open at 8:00 a.m.

- Morning Session: 8:30-1:00 - \$700.00  
 Full-Day Session: 8:30-5:00 - \$1,200.00  
*\*Non-Attending Catholic School Students add a \$5.00 Insurance Fee*

Amount Paid \_\_\_\_\_

*Please print clearly in black or blue ink.*

Entering Grade in September \_\_\_\_\_

Attending School \_\_\_\_\_

Last Name of Applicant \_\_\_\_\_ First \_\_\_\_\_

DOB \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Father Cell \_\_\_\_\_

Mother Cell \_\_\_\_\_

Father Email: \_\_\_\_\_

Work Phone \_\_\_\_\_

Mother Email: \_\_\_\_\_

Work Phone \_\_\_\_\_

In the event of apparent serious illness or accident, when we/I cannot be reached, please contact one of the following. The following are authorized to act in my absence and will be informed that their names have been used on this form. Please do not list mother or father in spaces below; it must be someone nearby who can be reached immediately.

1. Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

In case of a minor injury, I authorize that first aid be administered by a person qualified to render such service.  
In case of an accident,

Physician Name \_\_\_\_\_

Phone \_\_\_\_\_

Dentist Name \_\_\_\_\_

Phone \_\_\_\_\_

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

Relationship \_\_\_\_\_

Date \_\_\_\_\_

*\*Students not currently attending an Archdiocesan Catholic School, must add an additional \$5.00 for insurance coverage.*