



## LightHouse Parent/Child Programs 2011-2012

### **Parent/Child**

The purpose of the parent/child program is to provide a bridge between home life and school; it is an opportunity for parents to come together with their children for an experience of the rhythm and space of Waldorf early childhood education. Parents meet other parents and share parenting experiences and challenges with each other. For some parents this is their first experience of Waldorf education and the program provides opportunities to ask questions and learn more.

The schedule for the morning has a breathing rhythm of active, outgoing activities balanced with quieter, more focused activities. As everyone arrives and settles in, creative playtime occurs for the children, and parents work on craft projects. Together children and parents help with clean-up participate in a circle of songs, verses and finger plays and enjoy a healthy snack. Afterwards there is story time and then outdoor play.

### **Parent/Infant**

Parents of very young children are doing the most important work in the world. But living with infants is an experience for which very few are prepared. Each week, time is created to give our loving, focused attention to observing our children, learning about each child's unique development and gifts. Special attention is given to support the unfolding of children's interests, motor abilities, social interactions, and problem solving skills. Lullabies and special infant games are part of each afternoon's activities.

Tidewater reserves the right to cancel programs due to insufficient enrollment.

**No adjustments are made for absences, withdrawals or dismissals. However, if Tidewater cancels due to inclement weather we offer a make-up.**

### **Program Schedule:**

#### **Parent/Child Class, Fridays 9:30-11:30 AM**

**For ages 18 months – 3.5 yrs, siblings of any age welcome.** Make-up days are scheduled per season for weather cancellations or teacher illness.

#### **Parent/Infant Class, Mondays 1:30-3:00 PM**

**For infants 6 weeks to a year.** Make-up days are scheduled per season for weather cancellations or teacher illness.

#### **Fall Session I**

Monday, September 12 - October 31; 7 weeks. No class on October 10

Friday, September 16 – October 28; 7 weeks

#### **Fall Session II**

Monday, November 7 – December 12; 5 weeks. No class on November 21

Friday, November 18 – December 16; 4 weeks. No class on November 25

**Winter Session III**

Monday, January 9 - February 6; 4 weeks  
Friday, January 6 - February 17; 6 weeks. No class February 10

**Early Spring Session IV**

Monday, February 27 - March 26; 5 weeks  
Friday, March 2 - March 30; 4 weeks. No class on March 16

**Make-up days - Monday April 2 and Friday April 6**

**Spring Session V**

Monday, April 16 - June 4; 7 weeks. No class on May 28.  
Friday, April 20 - June 1; 6 weeks. No class on May 18.

**Tuition and Fees:**

**Parent/Child Class**

4 week session	\$120 (\$100 per family plus \$20 Materials fee)
5 week session	\$150 (\$125 per family plus \$25 Materials fee)
6 week session	\$180 (\$150 per family plus \$30 Materials fee)
7 week session	\$210 (\$175 per family plus \$35 Materials fee)

A one time complementary copy of "Beyond the Rainbow Bridge" is included when you enroll. Each session has room for 8 families to participate.

**Parent/Infant Class**

4 week session	\$80
5 week session	\$100
7 week session	\$140

A one time complementary copy of "Dear Parent: Caring for Infants with Respect" is included when you enroll. Each session has room for 8 families to participate.

# LightHouse Parent/Child Programs – Enrollment Form

**Enrollment is on a first come first serve basis.** To reserve a spot in any of these sessions please return this form with **nonrefundable** tuition and materials fee.

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

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Child's Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_

Sibling's Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_

**Check below for session and date desired:**

**Parent/Child** \_\_\_\_\_ **Parent/Infant** \_\_\_\_\_

**Fall Session I**

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\_\_\_\_\_ Monday, April 16 - June 4: 7 weeks

\_\_\_\_\_ Friday, April 20 - June 1; 6 weeks

Is there any medical information we should know or food allergies?

Signed \_\_\_\_\_ Date \_\_\_\_\_

Who should we contact in case of emergency?

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