



KALO Summer 2017

"Pa'ani Kamali'i"

- ◆ Open to boys and girls, entering Kindergarten thru 5th grade. Our theme this year is: "Pa'ani Kamali'i" which means: "Children at Play", focusing on Hawaiian Games.
- ◆ At one time, an important function of Hawaiian Games was training warriors to build stamina, strength and agility. Today these games are used for fun and as sports.
- ◆ Fun and skill will be emphasized in this year's summer program as your keiki engage in these various games of both old and new. Structured classes will include STEM and language arts while at the same time continuing to enrich our keiki in our Hawaiian values, traditions and customs.
- ◆ Keiki will learn the art of creating their own games to take with them at the end of the summer as well as the many mo'olelo, mele and mana'o of each Hawaiian Game taught.

Return application to:

KALO Summer Program

Attn: Stasia

PO Box 6511

Kamuela, HI 96743

Ph: (808) 890-2515

Fx: (808) 887-0030

Email: Stasia@kalo.org

Dates:

June 5 to July 7, 2017

Registration Deadline: Friday, May 26th

- ◆ **Cost:** \$200 per child
Scholarships are available
- ◆ **Grades:**
Students
ENTERING
Kindergarten, to
5th grade
- ◆ **Lunch:** will be provided at Waimea school Cafeteria

Hours

Monday through
Thursday: 8 A.M.
to 2:45 P.M.

*NO sessions on
Friday, except the
LAST day (Ho'ike)



SUMMER PROGRAM 2017

Enrollment for students entering Kindergarten, to 5th grade

Summer Session: Monday, June 5 – July 7, 2017

Monday to Thursday ONLY, Friday July 7 is Ho'ike

Time: 8:00 A.M. – 2:45 P.M.

Cost: \$200.00

Registration and payment deadline: Friday, May 26, 2017

Return to KALO office – Attn: Stasia

Please complete ALL sections of this application. Any missing information may delay the approval and acceptance of your child into the program.

Student's Full Name: _____
Last Name First Name Preferred or Nickname M.I.

Birth Date: _____ Gender: Male Female

Grade as of May 2017: _____

Last School Attended: _____ School Attending in Fall 2017: _____

Primary Contact: Mother Father Legal Guardian Other: _____

Mothers/Guardian Full Name: _____

Mothers/Guardian Mailing Address: _____
Street or P.O. City Zip

Mothers Home Phone: _____ Cell: _____ Email: _____

Fathers/Guardian Full Name: _____

Fathers/Guardian Mailing Address: _____
Street or P.O. City Zip

Fathers Home Phone: _____ Cell: _____ Email: _____

Student Applicant is of Hawaiian ancestry: YES NO

If YES: Percentage of Hawaiian of Mother: _____ Percentage of Hawaiian of Father: _____

List other ethnicities: _____



STUDENT COMMITMENT:

I (print STUDENT NAME), _____ agree that my attending the KALO Summer Program is a privilege that is based upon my meeting ALL of the following conditions:

- a) Attend all sessions
- b) Actively and fully participate in all program activities throughout the day/evening
- c) Fully comply and be pono with:

Aloha kekahi i kekahi, love one another
Malama i kou kuleana, take care of your responsibilities
Kokua aku kokua mai, give help and receive help
Mahalo i ka mea loa'a, be thankful for all that you receive, while participating in all the activities.

Disciplinary concerns: **NO TOLERANCE RULE!** No swearing, insubordination, teasing, bullying, fighting, etc. No tobacco products, alcohol, illegal drugs/substances, weapons, allowed on program site and locations.

I understand and agree that if I fail to meet any of the conditions listed above, I may lose my privilege of attending the program, starting at the time of infraction, also with no refund.

Student Signature Date

PARENT COMMITMENT:

I (print PARENT/GUARDIAN NAME) _____ have read the agreement above, and that my child and I fully understand what it says and that we voluntarily agree to this agreement.

I hereby certify that all information I have supplied on this entire form is true and correct to the best of my knowledge and I agree to furnish further information if required. I further agree and understand that any false information submitted on this form may be cause for non-acceptance into this program. *ALL information submitted is confidential and reviewed only by program administration and staff.

Parent/Guardian Signature Date

For Office Use Only

Date Application Received: _____ Reviewed By: _____

Scholarship Approved/Denial:(Reason): _____

Tuition Amount: _____ Admin Initial: _____

Payment received on: _____ \$ _____ Cash _____ Cashiers check# _____

Sponsored by Kanu o ka 'Āina Learning 'Ohana – KALO
Honoring the past, addressing the present, serving the future