

C.E.L.L.

Colorado Experiential Learning Lab

Location: Southmoor Elementary

After-School Science Club for grades 1-5

C.E.L.L. in its ninth year, is an after school enrichment program sponsored by a charitable Colorado non-profit organization in partnership with D.P.S. Mr. Lauren Wilson, a science educator, is offering Southmoor School students an opportunity to participate in a 5 week session of C.E.L.L. Topics include magnetism, electricity, chemistry, meteorology and more

Families are asked to make the financial commitment to the entire 5 week session, for a total of \$50.00 payable to C.E.L.L. at the first meeting. If you have questions, Mr. Wilson's phone number is 303-752-3300.

Meetings will be on **Thursdays, beginning November 5, 2009. Meeting dates will be 11/5, 12, 19, 12/3, 10. Times are 3:45 p.m. to 5:15 p.m. in room 106.** Please return this form and check. Students will be admitted to the sessions on a first come first served basis. (To facilitate this it is suggested that an adult bring this form directly to the office.) If you and your child are interested in making this 5 week commitment to science enrichment, please complete the form below and return it. Mr. Wilson will contact you prior to the first meeting to confirm your enrollment and answer any questions you may have.

Parents are responsible for making certain that their children understand where they will be picked up and by whom.

Parents note if your employer is philanthropic, CELL is a charitable corporation. It would be worth it to see if they would interested in donating to bring classroom or after school science enrichment to more students at Samules and DPS . Contact Lauren at 303-752-3300.

.....Keep this portion and return the bottom.....

WE ARE INTERESTED IN PARTICIPATING IN THE C.E.L.L. AFTER SCHOOL SCIENCE CLUB.

Child's name_____

Check if in after school care_____

Grade/room # _____

Parent's name_____

Address_____

Daytime phone_____ Evening phone_____

Does your child take any medications, have allergies or other medical problems? _____

Persons to contact in case of emergency: Name_____ Phone_____

Parents signature_____ date_____

Southmoor 11/5/09

