



# SUMMIT RESOURCE CENTER

at *The Summit School*

# Books Alive!

Wednesdays, October 5 - November 16

A book club for homeschool students with learning differences

Each week, students will explore jury-reviewed literature through a multi-sensory approach in a small group setting. Parents will join in the group for the last fifteen minutes of each class and receive extension activities to complement the week's session. All materials are included except for the cost of the books. **\$290 / student**

## Bookworms (Grades 1-3) • 10:00 am – 11:30 am

Our primary group will start by reading some of the Frog and Toad stories by Arnold Lobel. The group will then explore/read various books by authors such as Eric Carle, Dr. Seuss, and Louis Sachar.

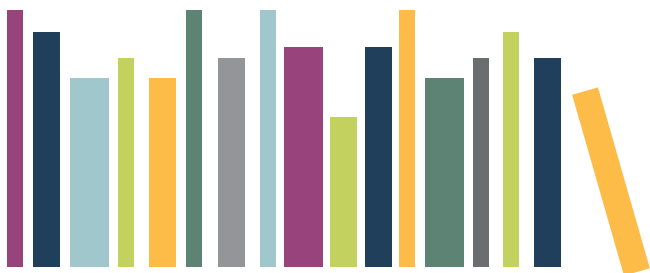
## Bibliophiles (Grades 4-6) • 11:30 am - 1:00 pm

Our intermediate group will start by reading *Fish in a Tree* by Lynda Mullaly Hunt. The group will then explore/read various books by authors such as Mary Ann Hoberman, Jon Scieszka, Lucy Maud Montgomery, and Christopher Paul Curtis.

**Location:** Edgewater Books, 131 Mitchells Chance Rd

### Contact:

Nancy Rhodes, Coordinator, Summit Resource Center  
410-798-0005 x147 • [nancy.rhodes@thesummitschool.org](mailto:nancy.rhodes@thesummitschool.org)



\*A minimum of four students must be enrolled to hold each class.

Edgewater  
Books

131 Mitchells Chance Road  
EDGEWATER MD



167 Mitchells Chance Road  
EDGEWATER MD

410-988-2103



**SUMMIT RESOURCE CENTER**  
at The Summit School

664 East Central Avenue  
Edgewater, Maryland 21037  
Phone: 410-798-0005  
Fax: 410-798-0008  
Coordinator: Nancy Rhodes  
Email: nancy.rhodes@thesummitschool.org

## **BOOKS ALIVE! REGISTRATION FORM**

*Thank you for enrolling in Books Alive! Homeschool Book Club.  
Please complete this form and return it with your payment in full.  
Nonrefundable payment is due no later than 9/30/16.*

Please select your group:

- Primary Group – Wednesdays from 10:00 am – 11:30 am
- Intermediate Group – Wednesdays from 11:30 am – 1:00 pm

Child's name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Current Age: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Father's name: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Address: \_\_\_\_\_

Additional address if applicable: \_\_\_\_\_

Phone: (h): \_\_\_\_\_ (w): \_\_\_\_\_

Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

Does your child participate in a Homeschool co-op? (Circle One) YES NO

If yes, please name: \_\_\_\_\_

Tell us about your child's reading strengths and weaknesses: \_\_\_\_\_

\_\_\_\_\_

Please let us know how you heard about this program: \_\_\_\_\_

\_\_\_\_\_

**Total Due \$290.00**

Enclosed payment: \_\_\_\_\_ CHECK      \_\_\_\_\_ Credit Card Authorization Form



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Summit Resource Center  
Credit Card Agreement

**I authorize The Summit School to process my credit card for \$290.00 for the *Books Alive!* Program.**

Child's Name \_\_\_\_\_

Credit Card:            MasterCard    Visa    Discover

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

Zip Code Associated with card: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Address Associated with Credit Card:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_