2019: Rockin' with Reading Interest Form

School Information

| School District: | |
|------------------|--|
| Vision Teacher: | |
| Teacher Phone: | |
| Teacher Email: | |

Medical

Any other vision or medical needs:

Other Questions or Concerns:



Interest form due May 1 Please return to:

WSBVI: Summer Program 1700 W State St Janesville, WI 53546 or Fax to 608-758-6116



pregnancy, marital or



2019: Rockin' with Reading



WI Center for the Blind and Visually Impaired 1700 W

Rockin' with Reading



Tuesday, July 30th -Friday, August 2nd

Rockin' is a 4-day camp for emerging readers who are blind or visually impaired



Presented by The Wisconsin School for the Blind and Visually Impaired



Program Details

Rockin' is a 4-day camp for emerging readers who are blind or visually impaired ages 4 - 7

- This is a day program only. Students should arrive at 9 am and be picked up at 3 pm.

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 This is a day program on
- Students will be served lunch on campus.
- Parents / guardians can remain to observe activities; however, it is not required.
- There are up to 6 available spots for this program. A wait list will be kept in the case of cancellations.

Program Information

- This is a day program only, no overnight accommodations will be provided.
- Transportation to and from WSBVI is the responsibility of the students' caretakers.
- Returning the attached interest form will generate a registration packet which will contain more detailed information.

Activities Include

- ▶ Letter Recognition: Braille, large print, and phonics
- Singing songs: Experience the rhythm of words, core vocabulary
- Reading time: Listening, following along, and recall
- Writing: Using unique tactile materials like sand and playdough
- **Exploration:** Of spaces, sounds, and using mobility skills to engage



If you have any questions please contact WSBVI Office Associate

Anna Heesen 608-758-6110 neesen@wcbyi.k12.wi.us

anna.heesen@wcbvi.k12.wi.us

Interest form is due May 1

Registration materials are due June 7
Parents who decide to stay may have to submit to a background check.
Students must be Wisconsin residents.

Interest Form

Please return this interest form via mail, fax or e-mail by **May 1, 2019**We will contact you regarding registration materials due **June 7, 2019**

Information

Guardian Name

| Caaraian Name | | |
|--|---------------|--|
| Address: | | |
| City/State/Zip: | | |
| Cell/Home Phone: | | |
| Work Phone: | | |
| Email: | | |
| Student Info | | |
| Student Name: | | |
| Student Birthday: | | |
| Age: | Grade: | |
| Does this student read at grade level? | | |
| Yes | No | |
| Students' Preferred Media: | | |
| □ Braille | □ Print | |
| □ Contracted | □ Large Print | |
| □ Uncontracted | □ Other: | |