



SARAH SHAFFER  
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Parent's Press 2017:  
Best After School  
Enrichment Program

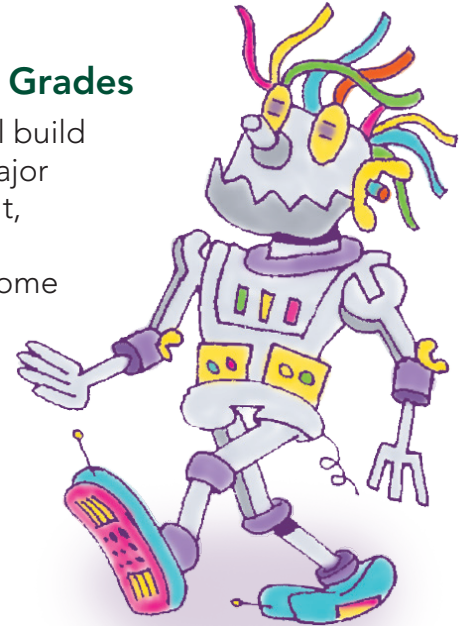


Bay Area Parent 2017:  
Best Science  
Support Program

# TOYOLOGY: SCIENCE THROUGH TOYS

## Los Perales Elementary After-School Science Program: TK-3rd Grades

In these exciting hands-on science classes we will build a variety of toys and use them to demonstrate major scientific concepts such as energy, electricity, light, gravity, motion, friction, magnetism and simple machines. Each student will construct and take home a science toy in every class. The classes will be taught by our award-winning staff.



Each student will make and take home:

- Light-Up Electric Robot
- Mighty Mini-Catapult
- Fly High Rocket
- Motorized Solar Cell Color Spinner
- And more . . .

**When: Thursdays – Sept. 27; Oct. 4, 11, 18, 25;  
Nov. 1, 8, 29 (no class Nov. 15, 22)**

**Time: 3:10pm – 4:10pm**

**Where: Room 23**

**Fee: \$215 for 8 classes**  
(Fee includes all materials)

Fall 2018-19  
**All New Projects!**

**Registration from Aug. 29 - Sept. 12**

For more information call (510) 581-3739 or visit [www.sarahscience.com](http://www.sarahscience.com)

## TOYOLOGY: SCIENCE THROUGH TOYS

### Registration Form — Los Perales Elementary — Fall 2018-19

We accept **CHECKS** payable to Sarah's Science or any major **CREDIT CARD** using the form below.

**MAIL** registration form payment to Sarah's Science, 21525 Knoll Way, Castro Valley, CA 94546

**FAX** registration to (510) 581-6144 or **SCAN & EMAIL** registration to [info@sarahscience.com](mailto:info@sarahscience.com).

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_ Grade: \_\_\_\_\_ Room/Teacher: \_\_\_\_\_ Allergies: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent 1

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Parent 2

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Before class my child is arriving from (circle one): Class / After School Program / Other: \_\_\_\_\_

After class my child is departing to (circle one): Parent / After School Program / Other: \_\_\_\_\_

FOR CREDIT CARD REGISTRATION:

Card #: \_\_\_\_\_ Expiration: \_\_\_\_\_ Security Code: \_\_\_\_\_

Terms and Conditions: Payment is due in full at time of registration. Students enrolling after the first class are eligible for a pro-rated rate.

No refunds or discounts will be given due to absences. Cancellations placed one week or more before the first class date are eligible for a full refund.

No refunds or credits will be issued less than a week before the first class date.

