



# Future Generation **STEM** Academy

## STEAM Camp

### 2024 Enrolment Form and Expectations

*wonder...learn...grow*

Thank you for enrolling your child in the **Future Generation STEM Academy** Camp 2024. We look forward to a wonderful and exciting three weeks. Please take the time to carefully read, review and complete all documents.

#### **Rules and Expectations**

For all campers to have a safe and memorable time at camp, we request that all camp participants adhere to the following rules.

1. Personal safety and the safety of other camp participants will be maintained as the primary concern.
2. Camp participants are expected to always walk in the building.
3. The use of vulgar, demeaning, or insulting language is unacceptable and may result in removal from participation in an activity or suspension from camp.
4. Respect should be given to all staff and camp participants both on site and while on educational outings.
5. The camp participant is expected to keep hands, feet, and objects to themselves.
6. The camp participant will only participate in activities for which he or she understands the directions and has the permission of the instructor.
7. The camp participant will report any accident, injury, or unsafe procedure to the instructor at once.
8. The camp participant will not taste, eat, drink, or inhale anything during STEAM Camp unless instructed to do so by the instructor.
9. The camp participant will remain in an area which has been designated by the instructor on less granted permission to depart to another area.
10. The camp participant will follow instructions and STEAM room procedures carefully and promptly.
11. While on educational outings, the camp participant will adhere to all the rules and expectations for our program and follow the directions of the chaperone and program staff.
12. While on educational outings, the camp participant will follow the rules and expectations for the facility and activities he or she is participating in.
13. The following rules pertain to safety while being transported by bus.
  - a. Immediately take a seat and remain facing forward.
  - b. Remain seated until the bus has arrived at our destination, and you have received permission to unload.
  - c. Do not block the aisle of the bus.
  - d. Extending arms, legs, or head out of the bus is not allowed.
  - e. Throwing objects on the bus or out of the window is not allowed.
  - f. Do not distract or talk to the bus driver except in an emergency.
  - g. Tampering with or damaging bus equipment is not allowed.
  - h. Place trash in garbage can provided near front of bus.
  - i. If you use the bathroom located at the back of the bus, be sure to leave it in a sanitary condition.

I have read and understand the rules and expectations for **STEAM Camp 2024**.

Parent's/Guardian's Initials: \_\_\_\_\_

## STEAM Camp 2024 Registration Form

<b>I am registering my child for:</b> <input type="checkbox"/> Future Generation <b>STEAM Camp for 2024</b> , June 3 <sup>rd</sup> through June 21 <sup>st</sup> . <input type="checkbox"/> <b>Track 1</b> (4-7) <input type="checkbox"/> <b>Track 2</b> (8-11) <input type="checkbox"/> <b>Track 3</b> (12-16) <input type="checkbox"/> <b>Field Trip (s) only:</b> Specify: _____			
Child			
First Name:	Middle:	Last:	Gender: Male Female
School Name:	Grade:	Date of birth:	Age (as of June 1 <sup>st</sup> ):
Street Address:			
City:	State:	Zip Code:	Home Phone #:
Parent/Guardian - Contact Information		Parent/Guardian #1	
First Name:	Last Name:	Ms. Mrs. Mr.	
Street Address:			
City:	State:	Zip Code:	Home Phone #:
Cell Phone:	Work Number:	Email:	
Occupation:	Employer:		
Parent/Guardian #2			
First Name:	Last Name:	Ms. Mrs. Mr.	
Street Address:			
City:	State:	Zip Code:	Home Phone #:
Cell Phone:	Work Number:	Email:	
Occupation:	Employer:		
Child lives with:			
Alternate Pickup/Release			
First Name:	Last Name:	Home Phone:	Work Phone:
Cell Phone:	Email:	Relation to child:	
First Name:	Last Name:	Home Phone:	Work Phone:
Cell Phone:	Email:	Relation to child:	
<b>Please list those people who are also allowed to pick up your child.</b>			
1.	2.	3.	
Medical Release Information			
Insurance Information	Policy #:	Insurance Provider:	
Primary Physician:			
Address:			
Phone #:	Hospital Preference:		
List any medical problems, including any required maintenance medication (i.e. diabetes, asthma, seizures)			
Medical Problem	Required Treatment	Should paramedics be called?	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is your child presently being treated for an injury or sickness, or taking any form of medication for any reason?			
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain:			
Is your child allergic to any type of food or medication?			
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain:			
Does your child require a special diet?			
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain:			
The purpose of the above-listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment.			

**In case of medical emergency contact:**

	Name	Phone #	Relationship to Child
Contact #1			
Contact #2			

I understand that I will be notified in the case of a medical emergency involving my child. If I cannot be reached, I authorize the calling of a doctor and the providing of necessary medical services in the event my child is injured or becomes ill.

**Parent's/Guardian's Initials:** \_\_\_\_\_

I understand that the FGSTEM Academy will not be responsible for the medical expenses incurred, but that such expenses will be my responsibility as parent/guardian.

**Parent's/Guardian's Initials:** \_\_\_\_\_

I understand that lunch and snacks are not included in the cost of camp, it is my responsibility to provide my camper with food for each day of camp.

**Parent's/Guardian's Initials:** \_\_\_\_\_

I understand that the registration fee entitles my camper to a camp shirt.

My child's shirt size is: \_\_\_\_\_

**Parent's/Guardian's Initials:** \_\_\_\_\_

**TUITION INFORMATION – \$35.00 Registration Fee \$150.00 per week, (\$140.00 for each additional child) \$140.00 field trip only (all trips). Attendance and participation are mandatory.**

**Please check how you heard about the Future Generation STEM Academy Camp.**

After School Program     Website     School: \_\_\_\_\_     Word of Mouth     Flyer  
 Other: \_\_\_\_\_

**Photo Release:** I hereby give permission for my child to be photographed during the **FGSTEM Academy STEAM Camp**. I understand the photos will be used to keep a journal of activities, to share during power point presentations and/or reports to our donors and for promotional purposes including flyers, brochures, newspaper and on the internet. I understand that although my child's photograph may be used for advertising, his or her identity will not be disclosed, I do not expect compensation and that all photos are the property of **FGSTEM Academy**.

**Parent's/Guardian's Initials:** \_\_\_\_\_

**Transportation Release:** I hereby give permission for the transportation of my child for official **FG STEM Academy** activities by modes of transportation agreed to by the program organizers. **This is pending.**

**Parent's/Guardian's Initials:** \_\_\_\_\_

**FG STEM Academy** is not responsible for lost or damaged personal property. All scheduled events are subject to change. I understand that no fees will be refunded or transferred unless a child is unable to participate due to an accident or illness per physician orders. Children's' photos and quotes may be used for publicity purposes. In case of an emergency, and if a family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel (i.e., EMT, First Responder, and/or Physician).

**Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Printed Name of Parent/Guardian:** \_\_\_\_\_