

ZION LC SUMMER CAMP 2024

Registration Fee (Non Refundable)

One Time Registration Fee: \$25 per child

Enrolled Zion Students (23-24 school year) & (24-25 school year)

Non Zion Students Registration Fee: \$45 per child

Only accepting incoming 2nd -6th graders (24-25 School Year)

Non Refundable Deposit: \$25 per week attending

Deposits will be applied towards the weekly rate.

Due at Registration: Packet, Registration Fee and Deposit

(Please TURN IN the packet before adding a payment to Brightwheel)

Weekly Rates

***Weekly payment is due the Friday prior to the actual week of attendance by 12 pm. ***

Payments made toward summer camp are non- refundable. (No Discounts Available)

Full Day (9am-3:00 pm)

3 day option (T/W/TH): \$175 per week

5 day option (M-F): \$225 per week
(\$50 savings)

Half Day (9am-12:00 pm) or (12pm -3pm)

3 day option (T/W/TH): \$115 per week

5 day option (M-F): \$150 per week
(\$25 savings)

*** Contact the front office for possible extended hours of care ***

| | | |
|--------|---------------------|------------------------------------|
| Week 1 | GAME WEEK | JUNE 10 - JUNE 14 |
| Week 2 | ANIMAL KINGDOM WEEK | JUNE 17 - JUNE 21 |
| Week 3 | STEM WEEK | JUNE 24 - JUNE 28 |
| Week 4 | AMERICA WEEK | JULY 1 - JULY 5 **CLOSED JULY 4 |
| Week 5 | ART WEEK | JULY 8 - JULY 12 |
| Week 6 | DRAMA WEEK | JULY 15 - JULY 19 |
| Week 7 | SPORTS WEEK | JULY 22 - JULY 26 |

ZION Summer Camp 2024

Complete one packet per each child.

Child's Name: _____ Male / Female Date of Birth: _____ Age: _____

Entering Year/Grade Level: _____ Currently Enrolled for Zion 2024-2025: ___ Yes ___ No

Siblings Attending: _____

Please put a check next to the weeks you would like your child to attend.

| | | Whole Day 9am-3 pm | Half Day 9am-12pm | Summer Camps | |
|--------|--|-----------------------|----------------------|---|----------------------------|
| 3 Days | | | | <u>Week 1</u> June 10 - 14 | Games Week |
| 5 Days | | | | | |
| 3 Days | | | | <u>Week 2</u> June 17 - 21 | Animal Kingdom Week |
| 5 Days | | | | | |
| 3 Days | | | | <u>Week 3</u> June 24 - 28 | Stem Week |
| 5 Days | | | | | |
| 3 Days | | | | <u>Week 4</u> July 1 - 5 <small>Closed July 4th</small> | America Week |
| 5 Days | | | | | |
| 3 Days | | | | <u>Week 5</u> July 8 - 12 | Art Week |
| 5 Days | | | | | |
| 3 Days | | | | <u>Week 6</u> July 15 - 19 | Drama Week |
| 5 Days | | | | | |
| 3 Days | | | | <u>Week 7</u> July 22 - 26 | Sports Week |
| 5 Days | | | | | |

June

July

| | | | | | | |
|----|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | | | | | | |

| | | | | | | |
|----|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | 1 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |
| 28 | 29 | 30 | 31 | | | |

ZION Summer Camp 2024

POLICIES AND PROCEDURES

Welcome to Zion's Summer Camp! We are excited you are joining us this Summer! Zion Summer Camp is designed to provide a safe, fun, nurturing, Christ-centered environment with opportunities for educational enrichment and organized play.

Please Initial next to each section:

_____ **BEHAVIOR/BULLYING POLICY**

Your child's well-being is very important to the staff. There is zero tolerance for bullying at Zion. Staff & Students should honor God in dress, language, and conduct. Children who intentionally harm another will be sent home for the day and possibly excluded from camp.

_____ **WEEKLY PAYMENT POLICY**

Tuition payments are due prior to the actual week of attendance. Please see the tuition due date schedule. **Children will not be admitted without payment.**

_____ **REGISTRATION FEE**

A non-refundable registration fee is required each year. A registration form must be on file for all students.

_____ **HOURS OF OPERATION**

Summer Camp is open Monday-Friday starting at 9:00 a.m. - 3:00 p.m. Camp begins June 10, 2024 through July 26, 2024.

_____ **REFUNDS**

Staff are scheduled according to the number of students registered; therefore, **there are no refunds due to absences.**

_____ **SCHEDULE CHANGE POLICY-**IMPORTANT****

If you find that you need to make a change to your child's original weekly schedule, you **MUST** contact the school or message us on Brightwheel the week prior to attendance. While there are no refunds, schedule changes may be considered and granted at the discretion of administration. **All changes must be emailed and acknowledged by the Front Office personnel.**

_____ **SICKNESS**

Children who have a fever, runny nose, severe cough or vomiting, will not be permitted to attend camp. Children with the listed symptoms will not be permitted to camp until they are symptom free for 24 hours.

_____ **SIGN-IN/SIGN-OUT**

All students must be checked in and out of Summer Camp by an adult (18+). If someone other than yourself will be picking up your child, they must be on the emergency pick up list and have identification. To make last-minute pick-up arrangements for someone not on your child's emergency sheet, contact the school office or message on Brightwheel. Verbal confirmations are not permitted.

_____ **DRESS CODE**

Students must wear appropriate summer attire; shorts under dresses or skirts are required. Swimwear and towels will be needed for water days.

_____ **SNACK/LUNCH**

Please pack your child's water bottle, snack for half day attendance and a lunch for full day attendance.

Zion Summer Camp 2024

Family Information

| | | |
|--------------------|----------------|-----------------|
| Student Last Name: | First Name: | |
| DOB: | Current Age: | Entering Grade: |
| Home Address: | City: | Zip Code: |
| Mother's Name: | Father's Name: | |
| Cell #: | Cell #: | |
| Work Phone #: | Work Phone #: | |
| Email: | Email: | |

Emergency Contacts

Please give name, relationship and phone number of persons other than parents to have your child picked up if he/she becomes ill at Summer Camp and parents cannot be reached. **Students will only be released to those persons listed below. Please notify the Staff whenever this information changes.**

| # | Name | Relationship | Phone # |
|---|------|--------------|---------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |

Medical Information: Please place a check in the box(es) that apply to your child.

- | | | |
|--|---|--|
| <input type="checkbox"/> NO KNOWN HEALTH PROBLEMS <input type="checkbox"/> Allergy-Pollen/Dust/hay fever <input type="checkbox"/> Allergy-Food (List) <input type="checkbox"/> Allergy-Medication (List) <input type="checkbox"/> Asthma- (no medication needed) <input type="checkbox"/> Asthma- (medication needed) <input type="checkbox"/> Blood Disorder | <input type="checkbox"/> Cerebral Palsy <input type="checkbox"/> Color Blindness <input type="checkbox"/> Diabetic <input type="checkbox"/> Hearing Aid Used <input type="checkbox"/> Hemophilia <input type="checkbox"/> ADD/ADHD <input type="checkbox"/> Epilepsy/Seizures | <input type="checkbox"/> Hearing Loss(which ear _____) <input type="checkbox"/> Speech Problem <input type="checkbox"/> Glasses/Contacts <input type="checkbox"/> Allergy-Bee Sting <input type="checkbox"/> Others (list below) |
|--|---|--|

Are there any physical conditions, which need special consideration in the event of an emergency?

Dear Parent/Guardian: Your signature below authorizes Zion to render the necessary emergency treatment for serious injury or accident (at your expense) if neither parent/guardian can be reached. In the event of an emergency, your child will be taken to the nearest hospital or emergency room.

Signature of Parent/Guardian

Date

Zion Summer Camp 2024

PARENT OR GUARDIAN RELEASE

The undersigned Parent/Guardian (hereinafter, "I") understands that the students will be supervised while participating during scheduled times. Summer Camp will have live-scanned adults in the presence of the children.

I, hereby, agree to release Zion Christian Preschool & Kindergarten and Zion Christian Learning Center and its agents, employees, volunteers, or members harmless from all actions, claims, liability, and expenses, whether known or unknown, present or future relating to or arising from or connected in any manner with the student's participating during Summer Camp herein. I read, understand and agree to the Policy and Procedures set forth by Zion Christian Preschool & Kindergarten and Zion Christian Learning Center.

This form must be signed and turned in along with all Summer Camp Forms no later than the first day of attendance. No child will be permitted to be dropped off unless this form has been signed and turned in to ZION.

| | | |
|--------------------------|---------------|---------------------------|
| Last name (child) | Middle | First name (child) |
|--------------------------|---------------|---------------------------|

| | |
|-------------------------------------|-------------|
| Signature of Parent/Guardian | Date |
|-------------------------------------|-------------|

MEDIA RELEASE:

Zion Christian Preschool & Kindergarten and Zion Christian Learning Center highlights positive news, events and programs in publications such as newsletters, on our website, on social media, with press releases and occasionally in video productions. Our Media/Photo release form allows you to withhold consent for the release of your child's photo or likeness in publications or productions such as those listed. This includes: newsletters, video productions, websites, social media, press releases.

2023 MEDIA RELEASE: Please check a box below

- I GIVE PERMISSION for my child's photograph or image to be used by Zion Christian Preschool and Kindergarten and Zion Christian Learning Center and/or those acting under its permission and on its authority.
- I DO NOT GIVE PERMISSION for my child's photograph or image to be used by Zion Christian Preschool and Kindergarten and Zion Christian Learning Center and/or those acting under its permission and on its authority.

Student's Name: (Print Clearly)

| | | |
|--------------------------|---------------|---------------------------|
| Last name (child) | Middle | First name (child) |
|--------------------------|---------------|---------------------------|

| | |
|-------------------------------------|-------------|
| Signature of Parent/Guardian | Date |
|-------------------------------------|-------------|