

## Superstar Summer Camp 2451 NE 186th St, #2 & 3, Aventura, FL 33180 June 9 - August 22 | 2025 | Ages 6 - 12

THIS IS YOUR EMERGENCY CONTACT INFORMATION, PLEASE PRINT CLEARLY

| FAMILY INFORMATION  |               |                       |   |             |   |  |
|---|---------------|-----------------------|---|-------------|---|--|
| Last Name:  |               | Number of campers#:   |   |             |   |  |
| Home Address:   |               |                       |   |             |   |  |
| City:   | State:        |                       | Zip Code:                                   |             | Country:  |  |
| Primary Email:  |               | Secondary Email:      |   |             |   |  |
| PARENT/GUARDIAN I   | NFORM         | ATION                 |   |             |   |  |
| Mother/Guardian Last Name:  |               |                       | Father/Guardian Last Name:                  |             |   |  |
| First Name:   | First Name:   |                       | First Name:                                 |             |   |  |
| Home Phone:   | Cell Phon     | e:                    | Home Phone:                                 |             | Cell Phone:   |  |
| Work Phone:   | Occupation:   |                       | Work Phone:                                 |             | Occupation:   |  |
| During the summer, camper(  Both Parents  |               |                       | ents 🗆 Other                                |             |   |  |
| EMERGENCY CONTA<br>contact a Parent/Guardian. F<br>child(ren) if we are unable to rea | Please prov   | ide two additional pe | ne event of an emerg<br>eople who have auth | ency, the o | camp manager will attempt to<br>ke all decisions regarding your |  |
| 1st Emergency Contact Name:   | acii a i alei | Phone 1:              |   | Phone 2:    |   |  |
| 2nd Emergency Contact Name: Phone 1:  |               | Phone 1:              | Phone 2:                                    |             |   |  |
| PICK-UP AUTHORIZAT Camp . I will notify the camp of picking-up your child (ren).      |               |                       |   |             |   |  |
| Name:   |               | Phone 1:              |   | Phone 2:    |   |  |
| Name:   |               | Phone 1:              | Phone 2:                                    |             |   |  |
| MEDICAL CONTACT I   | NFOR <i>M</i> | ATION                 |   |             |   |  |
| Physician Name:   |               | Physician Phone:      |   |             |   |  |
| Dentist Name:   |               | Dentist Phone:        |   |             |   |  |

### **REGISTRATION**

| Camper's Last Name:  | Camper's First Nar           | ne:                  | Birth Date:        | Gender:                        |  |
|--|------------------------------|----------------------|--------------------|--------------------------------|--|
|  |                              |                      |                    | ( ) Female                     |  |
|  |                              |                      |                    | ( ) Male                       |  |
| Medical Conditions: Including Physical, Behavioral, Psychological conditions requiring medication, treatment or special restrictions while in camp  Current Medications: List all medications over-the-counter |                              |                      |                    | ions, including prescribed and |  |
| Allergies & Dietary Restrictions: List an  | y severe reactions to drugs, | foods, insect bites, | poison ivy, etc.   |                                |  |
| Current School:  | Gr                           | ade Entering -       | Fall 2019:         |                                |  |
|  |                              |                      |                    |                                |  |
| Buddy Request (not guaranteed):  | •                            |                      |                    |                                |  |
| Transportation:  |                              |                      |                    |                                |  |
| T-Shirt Size:<br>Youth ( ) X-Smc   | ıll (2/4) ( ) Smal           | l (6/8)              | ( ) Medium (10/12) | ( ) Large (14/16)              |  |
| Adult ( ) Small  | ( ) Medi                     |                      | ( ) Large          | ( ) X-Large                    |  |
| Total Numbers of Weeks   |                              |                      |                    |                                |  |
| ( ) Week 1 6/9 - 6/13 Ca   | mp                           | \$_                  | ( ) aft            | er care p/w \$                 |  |
| ( ) Week 2 6/16 - 6/20 Ca  | mp                           | \$_                  | ( ) aft            | er care p/w \$                 |  |
| ( ) Week 3 6/23 - 6/27 Ca  | mp                           | \$_                  | ( ) aft            | er care p/w \$                 |  |
| ( ) Week 4 6/30 - 7/04 Ca  | mp                           | \$_                  | ( ) aft            | er care p/w \$                 |  |
| ( ) Week 5 7/07 – 7/11 Car   | mp                           | \$_                  | ( ) aft            | er care p/w \$                 |  |
| ( ) Week 6 7/14-7/18 Ca  | mp                           | \$_                  | ( ) aft            | er care p/w \$                 |  |
| ( ) Week 7 7/21 - 7/25 Ca  | mp                           | \$_                  | ( ) aft            | er care p/w \$                 |  |
| ( ) Week 8 7/28 - 8/01 Ca  | mp                           | \$_                  | ( ) aft            | er care p/w \$                 |  |
| ( ) Week 9 8/04 - 8/08 Car   | mp                           | \$_                  | ( ) afte           | r care p/w \$                  |  |
| ( ) Week 10 8/11-8/15 Car  | mp                           | \$_                  | ( ) afte           | r care p/w \$                  |  |
| ( ) Week 11 8/18 - 8/22 Car  | mp                           | \$_                  | ( ) afte           | r care p/w \$                  |  |

# PRICE LIST INCLUDING SNACKS & KOSHER LUNCH Per Day - \$150 | Per Week- \$650 | 5% OFF FOR 2ND CHILD\$250 PER WEEK FOR AFTER CARE UNTIL 6PM

| Code of Conduct:             | Total \$   | _                    |                           |
|------------------------------|--|----------------------|---------------------------|
| I understand that participat | ting in Superstar Camp is contingent upon my child(ren)'s adherence to the | Code of Conduct (see | Page 11) and violation of |
| said code may result in eith | ner suspension or termination from summer camp without a refund.           |                      |                           |

#### **CODE OF CONDUCT**

**Superstar Camp** is committed to making the camp environment safe and fun for everyone. Accordingly, all campers and their parents acknowledge the **Code of Conduct** to demonstrate their understanding of, and compliance with our camp's behavior expectations. No child will be admitted to camp without a parent/guardian signature (see page 12). Moreover, failure to comply with its principles may result in immediate suspension or dismissal from camp without a refund. We urge you to review the following information closely with your child(ren).

#### SUPERSTAR CAMP PARTICIPANTS ARE REQUIRED TO:

- 1. Be active listeners, cooperate, and follow directions given by camp staff, supervisors, guests and lifequards at all times.
- 2. Treat fellow campers, staff, supervisors, guests, lifeguards, public/private property and the environment with the utmost respect. We expect every camper to exercise goodwill towards others, our camp activities and facilities. Courtesy and respect are requirements of the camp community.
- 3. Refrain from using rude, offensive, or generally bad language. Harsh verbal words, tone of voice, foul language or gestures will not be tolerated.
- 4. Keep hands and bodies to themselves. If physical contact is made with another person, it must be both welcomed and appropriate. Teasing, horseplay, pushing, kicking, hitting, fighting, bullying or harassment will not be tolerated.
- 5. Stay with camp group, at all times. No child is permitted to leave the camp group without his or her counselor's permission and direct supervision.
- 6. Refrain from bringing fireworks, firearms, toy guns or weapons of any kind to camp.
- 7. Refrain from bringing or using any illegal drugs, tobacco, alcohol or intoxicants of any kind.
- 8. Know and understand the general camp rules, regulations and guidelines associated with the camp bus, van and group.
- 9. Cell phones and other mobile communication device usage (except in authorized camp activities) is strictly prohibited during the camp day. Other electronics, such as iPads, iPods, video games, laptops, etc., are prohibited. Any such item brought to camp will be taken and returned at the end of the day. Superstar Camp is not responsible for theft or damage to any camper's personal property.
- 10. Campers will be expected to participate in all scheduled camp program activities unless exempt because of health or parental restriction. Explanation must be in writing.
- 11. There is a zero tolerance policy for theft.

NOTE: It is not possible to anticipate every possible situation that may arise. In the absence of a particular situation or activity not listed above, COMMON SENSE AND COURTESY SHALL PREVAIL.

Superstar Camp implements a system of camper monitoring in its effort to provide an incomparable experience for all of its campers. If Superstar Camp determines that a camper is failing to adhere to this Code of Conduct, or presents a safety, behavioral or other concern that is detrimental to the camper, other campers, staff or employees, or to the overall camp experience, Superstar Camp reserves the right to enforce consequences. These consequences may include, but are not limited to: limitation of privileges, verbal and/or written warnings, parental notification, or, in extreme cases, expulsion from Superstar Camp without refund. Additionally, campers who repeatedly fail to adhere to the Code of Conduct may run the risk of not being allowed to attend Superstar Camp or CooLAM Productionms activities in the future.

#### **PAYMENT AGREEMENT FORM**

| Information: |  |  |
|--------------|--|--|

| miorinanon.                        |   |  |   |                   |
|------------------------------------|---|--|---|-------------------|
| Name:                              |   |  |   |                   |
|                                    |   |  |   | campers#          |
| Billing Name:                      |   |  |   | Cell Phone:       |
| -                                  |   |  |   |                   |
| Billing Address:                   |   |  |   | Home Phone:       |
|                                    |   |  |   |                   |
| B 1 1 5 5 5-                       |   |  |   | I &               |
| <b>Registration Fee: \$</b> 75 per | child or \$100 for two c  | hildren from same family                           |   | \$                |
| Camp Choices:                      |   |  |   |                   |
| Child 1:                           |   |  | Camp Price:   | \$                |
| Name:                              | Camp:   |  | □After care   | \$                |
| (Choose most expensive Camp t      | or Child 1)   |  |   |                   |
| Child 2:                           |   |  | Camp Price:   | \$                |
| Name:                              | Camp:   |  | □After Care   | \$                |
| Child 3:                           | _   |  | Camp Price:   | \$                |
| Name:                              | Camp:   |  | □After Care   | \$                |
| Child 4:                           |   |  | Camp Price:   | \$                |
| Name:Camp:                         |   |  | □After care   | \$                |
| Camp Scholarship Fund              | Tax Deductible D  | onation:   |   | \$                |
|                                    |   |  | <b>Total Due:</b> First Payment due upon registrat  | siion \$          |
| <b>Payment Information</b>         | on:   |  |   |                   |
| Credit Card #:                     |   |  | Remaining Payments:   |                   |
|                                    |   |  | Jan 15, 2024  | \$                |
|                                    |   |  | Feb 15, 2024  | \$                |
| Exp. Date:                         | VIN #:  |  | March 15, 2024  | \$                |
|                                    |   |  | April 15, 2024  | \$                |
|                                    |   |  | May 15, 2024  | \$                |
|                                    |   |  | 171dy 10, 2021  | Ψ                 |
| payment plan set forth a           | bove and to abide<br>& Procedures (cop<br>ect to a \$75 process | e by, and follow the po<br>y received at time of r | e fees, charges, etc., I he<br>dicies and procedures, set<br>registration) and all other te<br>for ALL Camps) | forth in the 2024 |
|                                    |   |  |   |                   |
| NAMEplease print                   | SIGNATURE   |  |   | DATE              |