



311 N. Orange Street New Smyrna Beach, FL 32168  
(386) 402-4460

Email: [info@upwardtrendacademy.com](mailto:info@upwardtrendacademy.com) Website: [www.UpwardTrendAcademy.com](http://www.UpwardTrendAcademy.com)

## Upward Trend Academy Summer Camp

Please specify the weeks you would like to enroll your child.

\*\*Students applying for the entire 6 weeks full-time spot will be given priority in acceptance to the summer camp.

	<b>Space Week:</b> June 9-June 13		<b>Camping Week:</b> June 16-June 20		<b>Beach/Florida</b> June 23-June 27
	<b>Pirate Week</b> June 30-July 3		<b>Cooking Week:</b> July 7-July 11		<b>Around the World</b> July 14-July 18
			<b>Fun &amp; Fitness</b> July 21-July 25		

### Weekly Tuition:

**Full Day:** Monday – Friday (8:30-3:30): \$200.00

**Partial Day:** Monday – Friday (9-12): \$125.00

**A 20% non-refundable deposit for each week your child attends is required to hold your spot.**

### Background Information:

**Child's Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Gender:** \_\_\_\_\_ **What Grade is the student going into:** \_\_\_\_\_

**Name of the school:** \_\_\_\_\_ **Does your student have an IEP or 504?:** \_\_\_\_\_

**What type of classroom is your child currently enrolled in (general ed., self-contained, mild, multi, etc.):** \_\_\_\_\_

**Father's Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Home Telephone:** (\_\_\_\_) \_\_\_\_\_ **Cell phone:** (\_\_\_\_) \_\_\_\_\_

**Email:** \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_



311 N. Orange Street New Smyrna Beach, FL 32168  
(386) 402-4460

Email: [info@upwardtrendacademy.com](mailto:info@upwardtrendacademy.com) Website: [www.UpwardTrendAcademy.com](http://www.UpwardTrendAcademy.com)

Home Telephone: (\_\_\_\_) \_\_\_\_\_ Cell phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

**With whom does the child live with?** \_\_\_\_\_

**Who should pick up your child in case of an emergency:** \_\_\_\_\_

Phone: \_\_\_\_\_

**Please list the name(s) of individuals authorized to pick up your child:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

**Does your child have a medical diagnosis?** Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what diagnosis? \_\_\_\_\_

Diagnosed By: \_\_\_\_\_ Age at Diagnosis: \_\_\_\_\_

## **Policies**

### **Payment**

Full weekly tuition payment is required upon arrival on Monday morning for the current week of attendance. Payment can be made by check, cash, or we can invoice you via email to pay by card. Please note a 3% processing fee will be added to payments made by card. A **20% non-refundable deposit** is required for all registered camps.

### **Cancellation & Dismissal**

No refunds will be issued after the current week of camp has started, including non-attendance due to illness or other reasons.



311 N. Orange Street New Smyrna Beach, FL 32168  
(386) 402-4460

Email: [info@upwardtrendacademy.com](mailto:info@upwardtrendacademy.com) Website: [www.UpwardTrendAcademy.com](http://www.UpwardTrendAcademy.com)

Upward Trend Academy's Summer Camp is designed for students who can successfully participate in a structured group setting with a 1:10 staff-to-student ratio. By enrolling your child, you are attesting that they have the prerequisite skills to engage appropriately in this environment.

Upward Trend Academy reserves the right to dismiss a student from the summer program if their behavior is disruptive, unsafe, or negatively impacts the experience of other campers. This includes, but is not limited to, physical aggression, elopement, excessive noncompliance, or behaviors that require one-on-one support beyond what our camp is structured to provide.

### **Sick Policy**

To maintain a healthy environment for all campers and staff, please keep your child at home if they exhibit any of the following symptoms:

- A fever of 100.0°F or higher (must be fever-free for 24 hours before returning)
- Vomiting
- Conjunctivitis (pink eye)
- Diarrhea
- Persistent cough lasting more than 5 days
- Runny nose with green/yellowish discharge
- Head lice
- Any symptoms related to COVID-19

If a child develops any of these symptoms during camp, they will need to be picked up immediately.

### **Pick-Up Policy & Late Fees**

The camp dismissal is at 4:00 p.m. each day. Parents/guardians must pick up their child on time.

A late fee of \$5 will be charged for every 2 minutes past 4:00 p.m. This fee goes directly to the staff as compensation for their time. Repeated late pick-ups may result in dismissal from the program.

### **Lunch & Snacks**

Parents are required to provide daily lunches, drinks, and snacks for their child. Please ensure that all food items and containers are labeled with your child's name.

By signing below, I acknowledge that I have reviewed and agree to the above policies for Upward Trend Academy's Summer Camp. I understand that my child must be able to function successfully in a group setting with a 1:10 ratio, and I confirm that they meet this prerequisite.



311 N. Orange Street New Smyrna Beach, FL 32168  
(386) 402-4460

Email: [info@upwardtrendacademy.com](mailto:info@upwardtrendacademy.com) Website: [www.UpwardTrendAcademy.com](http://www.UpwardTrendAcademy.com)

### **Photo Release**

I hereby give consent for Upward Trend Academy to photograph, and video record my child for educational, training, and promotional purposes. Photos or videos containing my child's image may be used on the organization's website or social media pages. If I do **not** consent to my child being photographed or recorded, I will notify Upward Trend Academy in writing.

### **Liability Release**

I acknowledge that my child has been accepted and permitted to participate in the summer camp. I hereby release, discharge, and waive Upward Trend Academy and their employees from all liability for injuries, loss or damage, and any claims for damage on account of any injuries to my child or his or her property while in the summer program. I have agreed to emergency treatment by a physician or hospital if I cannot be reached. I have disclosed all relevant information regarding my child's health condition.

### **Approval**

Spots fill quickly, so we encourage you to apply early! To secure a spot, all required forms in this application packet must be completed and submitted. Please note that applying does not guarantee enrollment, as space is limited.

---

**Parent/Guardian Signature**

**Date**

---

**Parent/Guardian Printed Name**

**Primary Phone Number**