

Ph: (202) 381-0880 Fax (202) 248 -7416 Email: info@ritasplacellc.com

Camp Dates: June 24, 2024 thru August 9, 2024



Our Summer Camp program will provide age appropriate activities for children ages 3 to 12 years old in a safe, fun and loving environment. Our weekly activities will include water play, arts and crafts, games, and much more. In addition, we will also have offsite field trips which will be conducted according to the safety guidelines set by the CDC and local health officials. All trips will be announced prior to each event.

SUMMER CAMP DETAILS

Dates: June 24, 2024 through August 9, 2024.

Camp Hours: 8:30 am to 4:30 pm **Aftercare**: 4:30 pm to 6:00 pm

Please be on time when picking up your camper, as there is a cash only late fee of \$2.00 per minute, per child. An

additional \$5.00 cash only fee will be charge for all late fees not paid within 24 hours. Initial

SUMMER CAMP TUITION

Camp Cost: There is a \$85 non-refundable deposit to secure your child's spot and a weekly fee is \$350/wk. The \$85
deposit will be applied to your child's weekly tuition. Payment is due prior to beginning of the period you've
enrolled your child to attend camp or the Monday morning of the week that your child is enrolled. If the camper's
tuition is not paid they will not be able to attend campInitial
Drop-In Cost: The drop-in rate is \$75/dayInitial
A late fee of \$30 will be charged if your payment is NOT received by due date. If your check is return as NSF, there
is a \$35 returned check fee. If your payment is returned, only cash, credit / debit card or money order will be
accepted as paymentInitial
Aftercare Cost: Aftercare is available from 4:30 pm to 6:00 and the weekly fee is \$150Initial

Campers Behavior: Any behavior that is considered dangerous to the child, other students, or staff will result in **immediate dismissal from Rita's Place <u>without a refund</u>. _____Initial**

Rita's Place COVID Policy Compliance: While COVID-19 continues to be a part of our reality, we have relaxed our COVID Policy. Masks are now optional; however, if your child is out sick with COVID-like symptoms, a negative COVID test will be required before your child returns to camp.

Initial

Potty Training: Rita's Place requires that all children attending our summer camp program be completely potty trained.

A potty trained camper.....

- Will tell our staff when they need to go to the bathroom before needing to go.
- Is able to go to the bathroom on their own that includes being able to remove clothing, sit on the toilet, wipe themselves using an appropriate amount of toilet paper, put clothing back on, flush the toilet, and wash and dry hands.
- Is fully aware of using the toilet without reminders from the staff (although, we do make requests of the campers at various time of the day and before going to the playground).
- Does not wear pull-ups or diapers. All campers must be in regular underwear.
- Is able to postpone going if waiting for someone else who is in the bathroom or if we are outside.

_____Initial

Summer Session: Please select which weeks your child will attend:

[] June 24th – June 29th - \$ **350.00**

[] July 1st – July 5th - \$ 280.00 (Please note there is no camp, Thursday, July 4th)

[] July 8th – July 12th - \$ **350.00**

[] July 15th – July 19th - **\$350.00**

[] July $22^{nd h}$ – July 26^{th} - \$ **350.00**

[July 29th - Aug 2nd - \$ **350.00**

[] August 5th – August 9th - **\$ 350.00**

While we are accepting registration for weekly sessions, we are also accepting daily attendees or drop-ins depending upon availability.

SUMMER CAMP SUPPLIES

Campers Supplies: All campers will be required to provide/bring the following items:

A water bottle

- Sunscreen

- Swimming attire (or clothing for water play) & shoes

- Towel

- Change of Clothes and shoes (that can be left at Rita's Place)

- Lunch & a Snack

- Rest mats (for 3, 4 and 5 year olds)



Participant Information

Rita's Place Summer Day Camp

If you have more than one child, please complete a form for each child.

Ph: (202) 381-0880 Fax (202) 248 -7416 Email: info@ritasplacellc.com

Child Name:			
(First)	(Middle)	(Last)	
Gender:	Date of Birth:		
Address:		Apt#	
City:	State:	Zip Code:	
Home Phone:	Cell	l :	
Please share any information that	would be helpful in meeting your	child's needs:	
Health Conditions / Allergy Inform	nation:		
Parent / Guardian #1 Contact Info	rmation:		
Parent / Guardian Name	Cell Phon	ne Work Phone	
Email Address:			
Parent / Guardian #2 Contact Info	rmation:		
Parent / Guardian Name	Cell Phon	ne Work Phone	
Email Address:			

Emergency Contact Information:			
Contact #1 - Name :	Cell #	Relationship to Camper	
	Home#		

Home# Work# Contact #2 - Name: Cell # Home# Work# Relationship to Camper Home# Work#

Pick-Up Release Information:

My Child(ren) may be picked up by any of the following people:			
Name:	Phone Number(s)	Relationship to camper	
	Cell:		
	Home:		
	Work:		
Name:	Phone Number(s)	Relationship to camper	
	Cell:		
	Home:		
	Work:		
Name:	Phone Number(s)	Relationship to camper	
	Cell:		
	Home:		
	Work:		

I agree to the terms written in the following statements:

Initial	Statements
	I will authorize by fax, phone, email or letter if my child(ren) are to be dismissed with persons other than
	those listed in the "Pick-Up Information" section of page 2.
	I agree to discharge, indemnify and hold harmless Rita's Place; employees, agents, or representatives
	of Rita's Place and all sponsors, participating Volunteer organizations and their agents, employees and representatives, from all claims, demands, actions or judgments which I, or my heirs, executors, administrators or assigns may have for any and all injuries and damages, known or unknown, caused by arising out of an activity / field trip with Rita's Place.
	I hereby give permission for my child(ren) to participate in camp activities sponsored by Rita's Place (to include field trips).
	I allow Rita's Place to use photo's of my child(ren) and copies of my child(ren)'s work for program Advertisement without use of my child(ren)'s name.

Parent / Guardian's Name printed	Parent / Guardian's Signature	
 Date:		



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Food Permission Form

(If you have more than one child, please complete a form for each child.)



Dear Parents & Guardians,

Rita's Place will be providing snacks on fun Fridays to the campers. However, we require your permission before we offer your child (ren) any food. We are aware that some of the children may have dietary requirements and we'll do our best to keep all student's food restrictions and allergies in consideration.

Please review and mark one of the choices below. This permission form will be good for the duration of our summer camp.

[] My child has a food allergy or dietary restrictions. They may participate Rita's Place, but may not eat or handle the following items:	•
[] My child MAY participate in food events hosted by Rita's Place.	
[] My child MAY NOT participate in food events hosted by Rita's Place. I venture for my child.	vill provide lunch and snacks
Child's Name:	_
Parent/Guardian's Name:	_
Parent/Guardian's Signature:	Date: