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ST. PETER ARMENIAN APOSTOLIC CHURCH



Dear faithful,

We joyfully announce the 2020 St. Peter Church, Our 4th Annual Musical Summer Program.

Last three Summers St. Peter Church had a wonderful Summer/Cultural and Musical Day Camp, which was a great success. We are happy to advise you this year also the summer program will take place at St. Peter Church grounds.

“Sound of Children”

Through the efforts of Director, Sirvart (Sylvia) Kavoukjian and her dedicated staff, we are planning to have a new wave of art and music integration into our church’s youth. This year’s theme is dedicated to our customs and old traditions under the title “I am Armenian” Ես Հայ Եմ. We encourage the parents to take full advantage of this inspiration, engagement, and empowerment of young minds.

St. Peter Church’s “Sound of Children” Summer Program is a unique musical art school that will enrich the children’s knowledge of Armenian culture and sharpen their artistic skills.

The youth is the primary focus of St. Peter Church. We thank you for your support.

With prayers,

Fr. Shnork Demirjian

Growing in Faith, Building our Future!



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St. Peter Church “Sound of Children” Summer Program

St. Peter “Sound of Children” Summer Program was created to promote our beautiful culture and heritage to our children and make them appreciate it and welcome it into their lives from a very young age.

Our children today are deprived from many cultural and important values, like art and music, poetry and dance, etc. By introducing these important elements from early age, it will help them be better humans and broaden their views, imagination and capabilities in life. It will also boost their self-recognition and shape them by creating caring individuals with kinder souls.

We are happy to introduce a “Musical and Armenian Cultural” summer program to all the children from ages 3-13 again this summer at our St. Peter Church campus. Our program hours are from 8:30AM to 3:30 PM 5 days a week. Extended hours are from 7:30AM – 5:30PM. The program runs for 8 weeks starting on Monday, June 15 thru Friday, August 7.

We carefully choose each summer’s theme in order to expand our children’s creativity and boost their passion towards identity awareness and cultural knowledge. Last year our summer program’s motto was “Who am I”. Children were able to discover about their past, their homeland, their music and poetry and their country. This year’s motto “I am Armenian” is an answer that our children will proudly announce and with that we’re intending on digging more into our cultural past, old traditions and ceremonies our people carried over to today’s days. At the end of our program, our children will demonstrate all that they’ve learned in a beautiful cultural concert that you will all be invited to and enjoy.

We also have by-weekly performances for our parents and grandparents on Fridays after camp. We see how these amazing performances touch everyone involved and how it changes our children and parents in so many better ways.

Our programs include daily Armenian language classes, music, science, literature, sports, arts & crafts, chess, cooking classes, dance, competitions, and plenty of games and fun activities.

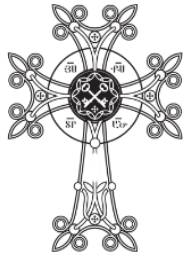
Nutrition is very important to us; therefore, our children will be served breakfast, snacks and lunch daily. All meals will be made fresh daily and will include plenty of fruits and vegetables.

Our counselors, aids and volunteers are carefully chosen so that they can be fully dedicated to our children’s safety, and lovingly discipline them and nurture their beautiful souls and body.

We are very excited about our program for 2020 and we hope to have another successful summer program.

Thank you,

Sirvart (Sylvia) Kavoukjian
Founder and Director
Sound of Children Cultural Program

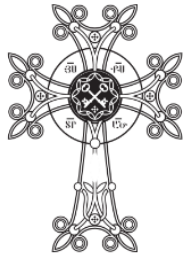


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St. Peter Armenian Church “Sound of Children”
2020 Summer Program
(information sheet)

- When:** June 15 – August 7, 2020 (8 – weeks)
- Who:** 3-13 years old boys and girls
- Where:** St. Peter Armenian Church grounds
17231 Sherman Way
Van Nuys, CA 91406
(818) 344 4860
- What:** Music and cultural program, songs, activities, play, crafts, sport activities, cooking, chess, ethics, dance, science, art, Armenian and religion classes
- Food:** All healthy meals (Breakfast, Lunch and 2 healthy snacks) included in the price
- Program Hours & Price:** **8:30AM to 3:30PM**
\$225.00 a week
- Extended Hours (Full):** **7:30AM to 5:30PM**
\$300.00 a week
- Extended morning 7:30AM-3:30PM**
\$250.00 a week
- Extended afternoon 8:30AM-5:30PM**
\$275.00 a week
- What to Bring:** Children 5 and younger, pillow and sheet for nap time
Please bring your own water bottle and towel
On water game days please bring swim suit and extra towel
T-shirt every Friday



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***St. Peter Armenian Church “Sound of Children”
 For the Summer of 2020***
 (Registration form)

Student Name _____ Age: _____
 Father’s Name _____ Mother’s Name _____
 Address: _____
 City and zip _____
 Home Phone _____ Cell phone _____ Emergency phone _____
 Email Address _____

Check the summer program of your choice

Program Hours ***\$225.00 per week (8:30am to 3:30pm)***

Extended Hours ***\$300.00 per week (7:30am to 5:30pm)***

Open House Discount \$10.00 Sibling Discount \$10.00 Full Course Discount \$20.00, 6-8 weeks enrollment
 Returning Camper’s Discount \$10.00 Sound of Children Discount \$50.00

Number of Week (s)* _____ **Sibling(s) Name in Summer Camp** _____

1st week (June 15-June 19) 3rd week (June 29– July 3*) 5th week (July 13-July 17) 7th week (July 27– July 31)
 2nd week (June 22-June 26) 4th week (July 6– July 10) 6th week (July 20-July 24) 8th week (August 3– August 7)

****Summer Camp will be closed on Friday, July 3rd, in observation of Independence Day.***

Payment options:

Total payments received _____

Check # _____ Cash _____ Credit Card _____ Number _____ Security Code _____

Cardholder’s Name _____ Exp Date _____

Cardholder’s Signature _____ Date _____

Parent’s Signature _____ Date _____

***\$60.00 Registration Fee Per Child (Includes 2 T-Shirts and Textbooks)
 All Payments are Non-Refundable and MUST BE PAID IN ADVANCE
 Credit Card Processing Fee Applies***



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***St. Peter Church “Sound of Children”
 Summer Program
 EMERGENCY RELEASE FORM***

I (We) the undersigned parent(s) or legal guardian of _____ D.O.B. _____ minor, do hereby authorize and consent to any x-ray examination, anesthetic, medical or surgical diagnosis rendered under the general supervision of any member of the medical staff and Emergency Room staff licensed under the provisions of the California Medicine Practice Act or a dentist licensed under the provisions of the dental Practice Act, and on the staff of any acute general hospital holding a current license for operate a hospital from the State of California Department of Public Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power to render care, which the aforementioned physicians in the exercise of his/her best judgment may deem advisable. It is understood that effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached. This authorization is given pursuant to the provisions of section 25.8 of the Civil Code of California.

PHYSICIAN'S NAME AND PHONE NUMBER _____

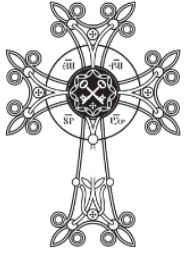
HEALTH INSURANCE CARRIER NAME _____ POLICY NUMBER _____

Any special medication taken/allergies or important information/comments:

I understand that emergency information is required by the St. Peter Church “The Sound of Music” Summer Program for the release and treatment of my child for any problem requiring possible emergency action. It is my responsibility to notify the school IMMEDIATELY of any change.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

PRINT PARENT NAME _____



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St. Peter Church "Sound of Children"
Summer Program
PHOTO AND EMERGENCY PICK UP RELEASE FORM

I hereby grant St. Peter Armenian Apostolic Church (Sound of Children) permission to use my child(s) likeness in photographs and/or video in any and all of its publications, including Web space, and in any and all other media, whether now known or hereafter existing, **controlled by St. Peter Armenian Church**, in perpetuity, and for other use by the Summer Program. I will make no monetary or other claim against St. Peter Armenian Church Summer Program for the use of the photographs and/or video.

Student(s) Name (print full name) _____

Parent's Name (print full name) _____ Signature _____

Date _____

<u>IN CASE OF EMERGENCY</u>		
Emergency Contact _____		
Relationship _____	Phone _____	
Special Notes _____		
<u>AUTHORIZED PEOPLE TO PICK UP CHILD</u>		
1)Name _____	Relationship _____	Phone _____
2)Name _____	Relationship _____	Phone _____
3)Name _____	Relationship _____	Phone _____



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St. Peter Armenian Church “Sound of Children” Summer Program
LIABILITY RELEASE FORM
Release of All Claims

In consideration for being accepted by St. Peter Armenian Apostolic Church (St. Peter) for participating in **St. Peter Armenian Church “Sound of Children” Year Round Program**, we being 21 years of age or older, for ourselves, and for and on behalf of our child-participant if our child is not 21 years of age or older, do hereby release, forever discharge and agree to hold harmless St. Peter Armenian Apostolic Church, and its officers, directors, members, agents, servants, volunteers, and employees from any and all liability, claims or demands for personal injury, sickness or death, as well as expenses, of any nature whatsoever, which may be incurred by the undersigned and/or the child/participant that we incur while our child-participant is participating in the above described activity.

Furthermore, we for ourselves and on behalf of our child-participant if under the age of 21 years hereby assume all risk of personal injury, sickness, death, damage and expense arising from participation in recreation and activities involved in the program. Further, we give authorization and permission to St. Peter Church to furnish any necessary transportation, food and lodging for the participant for the program activities.

The undersigned agree(s) to hold harmless and indemnify, on behalf of signor and named participant, St. Peter Armenian Apostolic Church, its officers, directors, members, agents, servants, volunteers, and employees, for any damages, or third-party claims for indemnity, sustained by St. Peter as the result of the negligent, willful or intentional acts of the undersigned participant, including any expenses incurred by St. Peter related to such acts.

Unless this document is signed by a participant who is over 21 years old, by signing below my signature confirms I am the parent or legal guardian of the participant. I grant permission for him/her to participate fully in any activities during this program. By signing below, I give permission to St. Peter and/or its agent(s) to take the named participant to a doctor or hospital if a medical emergency occurs. If I or my designated emergency contact cannot be reached by telephone or other means in a reasonable amount of time, or in an emergency situation where time is of the essence, I authorize medical treatment, including but not limited to emergency surgery or medical treatment, to stabilize the participant if needed, and I assume the responsibility of any medical bills arising from that treatment. Further, if circumstances require the participant to leave the program for the day due to medical reasons, disciplinary action or otherwise, the undersigned hereby assumes responsibility for all transportation costs.

The use of plurals such as “we, ourselves,” etc., is intended to also encompass the singular and should be read as “myself” etc., where appropriate.

_____		Participant’s Physician: _____
Type or print name of Participant		Name of Practice: _____
_____	_____	Physician’s phone: _____
Parent or Guardian home phone	work phone	Emergency Contacts: (when parent or guardian is unavailable)
Hospital Insurance <input type="checkbox"/> Yes <input type="checkbox"/> No		Name & Relationship _____
Insurance Company: _____		_____ <i>phone number</i>
_____	_____	Name & Relationship _____
Policy Number _____	_____	_____ <i>phone number</i>

Signatures

Only participant need sign if 21 years of age or older. If under 21, *both* parents must sign unless parents are separated or divorced in which case the custodial parent must sign.

 Father’s Signature

 Mother’s Signature

 Legal Guardian’s Signature

 Participant’s Signature