



CAMPS @ St. Timothy School

Registration Checklist

Welcome to the CAMPS @ St. Timothy School!

To complete your child's summer camp registration, please do the following:

- Review the **Camps @ St. Timothy School Information Pages** (both sides) to see what exciting and fun camps are offered.
- Fill out an **Initial Registration** form (both sides)
 - Turn in form with one-time payment of \$50 for registration per child.
- Select your child's camps on the **Friendship & Half-Day Camps Registration Form** or on the **Challenge & Specialty Camps Form** according to your child's age today.
 - Turn in with appropriate payment **on the Friday BEFORE camp.**
- Read, sign, and return the **Camps @ St. Timothy School Policies** sheet.
 - Review both sides with your family.
 - Sign and return the bottom portion (to be stapled to Initial Registration Form).
- Refer a friend and when they enroll their child, you get \$10 off your child's next week's camp fees.

**Thank you for enrolling your children,
and we're looking forward to a great summer!**

St. Timothy School
5365 Memorial Drive
Stone Mountain, GA 30083
Phone 404.297.8913
Fax 404.292.3396
www.sttimothyschool.com



OFFICE USE ONLY

\$50.00 Camp per child

Registration Fee Paid: _____

**2010 Initial Registration Form for
CAMPS @ St. Timothy School**

Both sides of this form must be completed for your child to participate.

Student Information

Student's Full Name _____ **Circle:** Male or Female _____
Last First

Age Today _____ Date of Birth _____ Email Address _____

Tee Shirt Size (Circle one) Youth Sizes: YS YM YL or Adult Sizes: AS AM AL AXL

Address _____
Street, Apt. City State Zip

Home Phone _____ **Mom's Cell Phone** _____ **Dad's Cell Phone** _____

Last School Attended _____ Grade (Fall 2010) _____
Name and City

Parent/Guardian Information Marital Status: Married Divorced /Separated Other **Child Resides with** _____

Father's Full Name _____
Last First Middle

Father's Place of Employment _____ Work Phone _____

Father's Address & Phone (If different from child's) _____

Mother's Full Name _____
Last First Middle

Mother's Place of Employment _____ Work Phone _____

Mother's Address & Phone (If different from child's) _____

Emergency Contact if unable to reach parent/guardian:

Name _____ Relationship _____ Phone _____

Authorization for Medication and Medical Considerations I understand that I must complete a **St. Timothy School Administration of Medication Request Form** before my child will be given any medication while at St. Timothy School. I understand that any change in the dosage will require a new form. I also understand that I may not send any medication to school with my child or in my child's backpack. I understand that I must bring all medication to a camp director or staff designee.

List any allergies, medical conditions, limitations or any other special considerations:

(Continued from front of sheet)

Authorization and Consent for Medical Treatment Understanding that my child may need emergency medical treatment during activities while he/she attends a camp at St. Timothy School, I authorize the School to administer such first aid or other minor treatment as shall be deemed best under the circumstances, and I consent for my child to receive such treatment. I understand that the School will attempt to notify me (or my spouse) in the event of an emergency requiring immediate medical care for my child, and if the School is unable to notify me, it will have my child treated by a duly qualified physician at the nearest emergency clinic.

Field Trips (Ages 5-12 Only) I understand that my child may be going on field trips during the Camps @ St. Timothy School program and that I will be notified prior to any field trip as to the date, time, and place of the field trip. I give my permission for my child to participate in field trips.

Change in Enrollment Information I understand that I must provide St. Timothy School with updated enrollment information as soon as possible. This includes changes in phone numbers, living arrangements, addresses, and emergency contact information.

Permission to Use the Internet I give permission for my child to use the Internet for classroom projects. (Students will not be allowed to check their email, "chat" or IM while on the Internet.)

Media Release I give consent for my child(ren) to appear in any publication, film, interview, web page, video for Camps @ St. Timothy School, or St. Timothy School. No children's names are to be included with images.

Financial Obligations for Camps

Cash, credit cards (during business hours), money orders and checks accepted. PLEASE MAKE CHECKS PAYABLE TO ST. TIMOTHY SCHOOL. (Please include your child's full name on the check.)

I understand that the cost of the camp will not be adjusted for days missed due to illness, holidays, or inclement weather. I also understand that there is a **\$35.00 fee for checks which are returned "Insufficient Funds"** and that after two such checks, I must make all future payments with a MONEY ORDER or in CASH.

Registration and payment are due the FRIDAY BEFORE the selected camp starts, and no camper may stay in camp if payments are not received before the selected camp starts. Small additional fees may be collected with notice.

Hours and Pick-up: I understand that the Summer Camp hours begin at 7:00a.m. and end at 6:00 p.m. I will be escorting my child in and out of the building for the Summer Camp Program and signing them **in and out when dropping off and picking up. Late pick-up fees (after 6:00 p.m. or 12:30 for ½ day campers) are \$1.00 per minute per child.**

Parent Signature _____ Date _____

CAMPS @ ST. TIMOTHY SCHOOL Policies

Welcome! We are happy that you have chosen the Camps @ St. Timothy School this summer for your child. An exciting, adventurous, and fun program has been planned for our summer camps. The following is important information for you and your child. Please read both pages carefully and go over it with your family. **Sign and return the bottom portion upon enrollment.**

Sign In and Out Parents are to escort their children into and out of camp everyday and sign the appropriate form. This is for the safety of all our campers. A written note or phone call to the director is required if someone other than a parent is to pick up your child.

Payment Policies All payments for camps are due the Friday before the camp starts. We will take payment on Monday morning (for Challenge and Specialty Camps only) but no camper may stay in camp if the payment is not made that Monday morning. Please include your child's full name on checks.

Daily Camper Clothing & Supplies Campers should wear comfortable play clothes that can get dirty and in which they can participate in outside play activities. They should wear sneakers or other shoes that protect the foot during open play in the gym. On swimming days campers are to bring a swimsuit, a towel, water shoes, and a change of clothes that they can change into themselves. If they need sunscreen they are to supply their own and be able to apply it themselves. Please label all of their items. An inexpensive, lightweight tote bag would be great to carry items.

Breakfast, Lunch, & Snack They are included in your fees. Your child may bring a lunch or snack provided it needs no refrigeration or heating. Optional purchase of ice cream will be available daily for \$1.00.

Camper Illness/Accidents In the event the camper becomes ill or has an accident, the Camp Director or Lead Counselor will notify the parent or guardian. For minor accidents/illness, the camp staff will provide appropriate first aid and will notify the parent upon pick up.

Camper Emergencies For camper emergencies, the Camp Director or Lead Counselor will notify the parent or guardian of the situation. If the parent/guardian is unavailable or cannot be reached the camp staff, we will seek emergency medical treatment from qualified medical professionals. In the event emergency medical treatment is necessary, the physician is authorized to provide necessary medical care as needed unless otherwise indicated on the Child's Parental Consent and Emergency Medical Release Form. If the parent or guardian is still unable to be reached, the camp staff will notify the authorized emergency contact.

Camper Medication If a camper is required to take any form of medication during the day, the **Administration Of Medication Request** form should contain the information. The parent/guardian of the camper should provide the Camp Director with the medication in a clearly labeled container with exact directions for administration. Asthma inhalers or injectable medication must be provided by the parent/guardian, and will be under the direct supervision of the child's counselor. Each counselor will have a copy of each child's medical needs as noted in the Administration Of Medication Request form. **Campers will self-administer inhalers, and apply sunscreen and bug spray when needed unless the parent has made prior arrangements with the Camp Director.** For safety reasons, campers may not maintain possession of their medication while in camp; their lead counselor will assume responsibility for the medication.

Field Trips We will post a reminder for field trips near the sign in area. Campers must wear their camp T-shirt on field trip days. Campers will receive their t-shirts on the first day of the first session they attend. Please note that campers receive one free t-shirt per summer, if they lose the shirt they are given, the parent will have to purchase a second one.

(Continued on back of sheet)

(Continued from front of sheet)

Behavior Guidelines Appropriate behavior is essential to learning and growing and should be based upon mutual respect for the rights and property of others, respect for those placed in authority, and respect for every student. No one will be allowed to jeopardize the health, safety, or learning environment of other children. Children will be expected to display responsible behavior when they are attending Camp. Emphasis is placed upon each student for taking responsibility for his/her own behaviors. **The following are general expectations of all campers:**

- Keep hands, feet, and all objects to yourself.
- Listen and follow directions the FIRST time given.
- Respect others and camp equipment.
- Use words to solve problems. If that doesn't work, ask a counselor or CIT for assistance.
- **NEVER be out of sight of a CIT or Counselor.**

Camper Discipline Please talk to your child about respect and obedience when given instructions by camp staff. There may be times during camp when it becomes necessary to administer discipline to a camper. We encourage positive actions through positive reinforcement and close supervision. Our main goal is to keep the children safely involved in activities so the inappropriate behavior is limited. The following steps are followed if inappropriate behavior occurs.

1. The camper will be spoken to privately, in a firm but gentle manner regarding the unacceptable behavior.
2. If the said behavior continues, the camper will be removed from the activity for a cool down until both the counselor and the camper feel the camper is ready to return.
3. If the said behavior still continues, the camper will be sent to the director and will have to write a statement as to why the behavior was not acceptable.
4. If necessary the camper's parent will be called or spoken with before the camper departs for the day.
5. A second incident of the same behavior by the same camper will cause staff to skip the first steps, and the camper will be immediately sent to the director and a call will be made to the parent for guardian.
6. The third incident of the same behavior by the same camper will require an immediate suspension with the camper being sent home.
7. A child may be terminated from camp without prior notice to the parents under the following conditions:
 - a. A child injures another individual requiring medical attention
 - b. A child displays violent, uncontrollable behavior that will put others in the program at risk.

Toys and cells The camp staff requests that you do not send any toys (e.g. Game Boys, iPods, cell phones, etc) with your child when they come to camp. The toys from home are a distraction from camp fun. **The camp will not be held responsible for lost or stolen items.** Parents and/or guardians will be notified should the child need to bring other items to camp.

Lost and Found The camp will maintain a lost and found area near the sign in table. Please follow the following guidelines:

1. Please label **everything** your child brings to camp, with their full name.
2. We are not responsible for the loss or damage of any items that your child may bring to camp.
3. At the end of each week all lost and found that is not claimed will go to a charity.

Thank you and we are looking forward to a great summer!

Please cut off this portion and return tomorrow. We acknowledge that we have reviewed the Camps @ St. Timothy School Policies.

Date _____

Camper's Name (Print) _____ Camper's Signature _____

Parent's Name (Print) _____ Parent's Signature _____

CAMPS @ ST. TIMOTHY SCHOOL

ADMINISTRATION OF MEDICATION REQUEST

Child's Name: _____

To insure the safety of all students at our school,
the following guidelines must be followed when medications are to be sent to school.

1. All medications (prescription and non-prescription) must be given directly by a parent to the camp directors or a designee for safe storage.
2. **Each medication**, both prescription and over-the-counter, **must be accompanied by this form.** (Additional forms are available in the office.)
3. All medications must be in the ORIGINAL CHILDPROOF CONTAINER. Prescription medications must be in the labeled prescription bottle. Medications stored in envelopes, baggies, etc., will NOT BE ADMINISTERED.
4. Administration of prescription and over-the-counter medicine (even for a short period of time) is discouraged. Parents should check with their physician regarding the need for medications to be administered during school hours. Medications prescribed for three times daily often can be given before school, after school, and at bedtime. If you have any questions about this procedure, please call your doctor.

Student's Name: _____ Class/Grade: _____

Name of Medication: _____ Doctor: _____

Reason Medication Given: _____

Amount to be Given: _____

Times to be Given: _____

Possible Side Effects: _____

Special Instructions: _____

I, _____, grant permission for a St. Timothy School designee to assist in the administration of the medication listed above for my child, _____.

I understand that the school personnel cannot assure that anything more than a reasonable effort will be made to assist the student and I further agree to waive any claims of liability that may arise against any school personnel relative to the administration of this medication to my child according to the instructions provided above.

Contact Phone Numbers: Cell: _____ Work: _____ Home: _____

Parent's Printed Name _____

Parent's Signature _____ Date _____