



**SACRED HEART
SUMMER CAMP
2010**

June 1 - August 20

Come one day, one week or all summer!

Join lots of kids for a
fun, safe and enjoyable summer of activities.

Arts & Crafts

Games

Music

Water Days

Treasure Hunts

Scavenger Hunts

Compass activities

Team Sports

Frisbee Golf

Science & lots more!

Ages 4 - 12

Camp hours - 7:00am to 6:00pm

Weekly rates begin at \$85 for one child (9am-4pm)

Sacred Heart School ♥ 915 Runneburg Rd ♥ Crosby, TX 77532

Visit www.sacredheartschoolcrosby.org

or call 281-328-6561 or 281-328-4871 for more information

Sacred Heart Kids Camp Guidelines

1. The camp will be Monday–Friday, June 1 – August 20, 2010, (NO CAMP ON JULY 5) and holidays and in-service days during the 2010-2011 school year.
2. Regular drop-off & pick-up takes place at the Early Childhood Center. Drop-off is from 8:45–9:00am and pick-up is from 3:45–4:00pm for those campers not staying in the Pre Camp or Post Camp sessions.
3. Pre Camp session is from 7:00–9:00am and Post Camp session is from 4:00–6:00pm. Beginning at 6:00pm an additional \$15 per half hour will apply.
4. We accept Campers from 4 through 12 years of age. (Campers must be 4 years old by June 1, 2010, potty trained & had six months of school/day care time. Parents must bring letter documenting enrollment.)
5. All fees are due at the time of registration. Fees may be paid on a weekly or monthly basis and must be **paid in advance**. Camp spaces are limited and taken on a first come basis. Campers must stay for a full week otherwise the daily rate will apply.

Cost

Registration fee (annual)	\$ 50 per family (plus \$10 per additional child) (Includes a Camp T-shirt)
Regular weekly fee (9:00am – 4:00pm)	\$ 85 per week 1 child \$120 per week 2 children \$180 per week 3 children
Daily rate	\$ 20 per day per child
Pre camp (7:00–9:00am) and Post camp (4:00–6:00pm)	\$ 15 per week per child

Camp shirts: Every camper will receive one camp T-shirt. Additional shirts can be purchased for \$10 each.

Registration & payment: Registration fee is due when submitting registration paperwork in order to hold a space. Payment may be made on a weekly or monthly basis and be paid in advance. Those choosing the weekly attendance option must attend all week, otherwise the daily rate will apply. At registration, you must sign-up for the dates your child will attend.

6. Registration fees are for the year and entitle the student to attend on other holidays and in-service days during the school year. The daily rate will apply unless camp is offered for the entire week.
7. Campers may not bring friends or relatives to camp unless they are registered by their parent or guardian.
8. Please have your child bring his or her sack lunch daily. Drinks may be purchased from our vending machine for 75¢ each. Please give the money at check in. An afternoon snack will be provided. Parents may send a morning snack. A water bottle with the child's name clearly marked may also be sent.
9. Let us know if your child has any special needs or if your child will have to take medication during the camp times. Please leave this with the counselor at check-in time.
10. Dress your child to play (comfortable and washable), and please make sure your child's name is on their clothes. We encourage you to provide a change of clothes in case of accidents. These may be left at camp. A cubby will be provided. On "Water Days" please send a towel and extra clothes.
11. We discourage the campers from bringing personal toys or any other items which are not necessary for the camp.
12. Sacred Heart Camp cannot be responsible for items which children bring to camp and are lost or stolen. Each child will have their own cubby in which to store their belongings.
13. We ask each parent to be patient with all counselors. If you have a concern, please discuss this with a counselor or Camp Director.
14. The Camp Director reserves the right to discontinue registration of any camper due to, but not limited to, the following: behavioral problems, not potty trained, conflict of interest between camper/parent and employees of the camp, failure to pay by day(s) assigned, and/or continuously not being on-time.

I have read the Summer Camp Guidelines and I understand and will abide by them.

Children's Names _____

Print Name _____

Signature of Parent(s) or Legal Guardian(s) _____

**Sacred Heart Kids Camp
2010/2011 Camp
Registration/Permission Slip and Medical Release Form**

Child Name: _____ Age: _____ Grade (2010-11) _____ Sex: _____

Parents Name: _____

Address: _____

City: _____ State: TX Zip: _____

Home Phone #: _____ Date of Birth: _____ T-shirt size: _____

(Child's Name) _____ has my permission to participate in the Sacred Heart Kids Camp program. I release Sacred Heart School and its directors, counselors, and volunteers of any liability or responsibility in the case of accident or injury of my child. I further consent that the Camp Directors or Head Counselor may order an ambulance at my expense to transport my child in an extreme emergency to an area hospital.

**Circle weeks attending or indicate individual days attending below each week.
Also, check if child will be attending pre or post camp:**

	Week of June 1	Week of June 7	Week of June 14	Week of June 21	Week of June 28	Week of July 6
Individual Days						
Pre Camp						
Post Camp						
	Week of July 12	Week of July 19	Week of July 26	Week of August 2	Week of August 9	Week of August 16
Individual Days						
Pre Camp						
Post Camp						

Please provide names of those who are authorized to pick-up your child:

Name	Relationship	Phone
1. _____	_____	_____
2. _____	_____	_____

Emergency Information

List any medication your child may be taking at home or at camp: _____

Family Physician _____ Phone _____

Mother's Work Phone _____ Dad's Work Phone _____

Mother's Cell Phone _____ Dad's cell Phone _____

Relative or Neighbor _____ Phone _____

*** Copy of Immunization Records Required**

x _____
Parent / Guardian Signature Date

**If your child has a fever or is vomiting, we will contact you to take them home.
Please do not send your child to camp if they are ill. Germs and viruses spread very fast among children and staff.**

Sacred Heart Kids Camp Administration for Non-Prescription Medication

Child's Name: _____ Sex: _____
Birthdate: _____ Grade for 2010-11: _____

Please mark "YES" or "NO" in each blank.

May mosquito repellent be administered to your child? _____

In the case of a cut or scrape, may the following be administered to your child?

Hydrogen Peroxide _____

Bactine Spray _____

Neosporin Antibiotic Cream _____

In the event that your child has a fever, may Children's Tylenol be administered? _____

(Signed Medical Permission Form Required)

In the event of an ant bite or bee sting, may Benadryl Cream be administered? _____

Does your child use an inhaler? _____

(Signed Medical Permission Form Required)

Is your child allergic to any medications? If so, please list: _____

Does your child have any other allergies? _____ If so, please list _____ :

Does your child have any medical conditions which camp staff should be aware of? __

If so, please explain _____

If there is evidence of a reaction of any sort, parents or guardians will be contacted in accordance to the information below or as indicated on your child's Permission Slip and Medical Release Form.

I hereby grant permission for the Sacred Heart Kids Club Director or other Camp Personnel to administer medication to my child according to the statement given above.

Printed name of Parent / Guardian

Parent / Guardian Signature

Address

Telephone

Date