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**Summer Camp Application Form**

**2019**

**Child’s Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preferred Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_ Boy: \_\_\_ Girl: \_\_\_

Does your child have allergies? Yes: \_\_ No \_\_ What kind? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have any medical conditions to be concerned with? Yes \_\_\_\_\_\_ No \_\_\_\_\_\_

If yes, please list: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your child required to take any medicine during camp? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, we need a doctor’s note and detailed instructions. Medication has to be in original container.

Age/Grade your child will be attending in August 2019:

Littler Learner (3 yr) \_\_\_\_\_\_ Pre-K (4 yr) \_\_\_\_\_\_\_\_ Kindergarten (5 yr) \_\_\_\_\_\_\_

1st grade (6 yr) \_\_\_\_\_ 2nd grade (7 yr) \_\_\_\_\_\_\_\_\_\_

**\*Child must be completely potty trained before coming to camp.**

**Contact Information:** (please print clearly)

Parent/Guardian Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father’s Cell # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/St \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_

**Physician’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree to follow the MMOLA school policy and procedures as outlined in the weekly MMOLA Summer Camp Newsletter.

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE TURN THIS APPLICATION OVER TO COMPLETE**

![C:\Documents and Settings\Judy Harris\Local Settings\Temporary Internet Files\Content.IE5\V03ABKKA\0511-1004-1915-3238_Summer_Cartoon_of_Kids_in_an_Inflatable_Raft_clipart_image[1].jpg]()Name of Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Camp Weeks: Select the week(s) your child will be attending:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Week 1 |  Under the Big Top! | June 17-21 | 9 am – 2 pm | $175.00 |
|  | Week 2 | Crazy Camping!  | June 24-28 | 9 am – 2 pm | $175.00 |
|  | Week 3 | Movin’ & Groovin’ in the USA | July 1-5\* | 9 am – 2 pm | $165.00 |
|  | Week 4 | The Wonderful World of Disney  | July 8-12 | 9 am – 2 pm | $175.00 |
|  | Week 5 | Sports Fanatics | July 15-19 | 9 am – 2 pm | $175.00 |

\*There will be no camp Thursday, July 4th (Week 3).

One day a week will be Culinary Snack Day, where children make their own snack. Each Wednesday will be Water Day, and each Friday will be Fun Friday with Happy Feet challenging the children with group sport activities. Also, on Friday for an additional $5 your child can purchase pizza and juice for lunch. There will be a movie and popcorn, pretzels or popsicles as well!

One-time Registration fee of $40 per camper is required with this application. Preference of payment: check payable to MMOLA or DEBIT card or cash. Thank you!

Number of weeks \_\_\_\_\_\_\_ x $175 = $ \_\_\_\_\_\_\_ Weeks can be paid separately, 1 week in advance. (Pizza can be paid the week of camp.)

Registration Fee received: Date \_\_\_\_\_\_ $40 \_\_ Cash \_\_ Check # \_\_\_\_ Debit Card \_\_

Camp Tuition payment received: Date\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_ Cash \_\_ Check # \_\_\_\_\_\_ Debit Card \_\_

Required forms:

* Camp application form filled out and signed by parent/guardian.
* Copies of immunization and physical exam forms from child’s doctor. (Currently enrolled MMOLA students need not bring in new ones, we have yours on file.)

Please bring in daily:

* Morning snack with a drink.
* Nutritious lunch & drink with an ice pack in a lunch box. Please include utensils and napkin.
* A thermos or bottle of water that your child can keep in their cubby to have access to at anytime.
* A change of clothes in your child’s backpack or plastic bag. (Put your child’s name on the bag.)

**Emergency contacts**: List authorized people who we may call if we cannot reach you and who may pick up your child from camp:

Name of person Relationship Phone #

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_