

# Summer Session at Merryhill Preschool

School-Age  
Summer Camp 2017



## Your Mission:

- Field Trips & Events
- Arts and Cooking
- Nature & Science
- Sports & Games
- Have Fun



# Your Mission

*Should you choose to accept it...*

## About our Program

Each week, children who have completed kindergarten through 3<sup>rd</sup> grade jump into action, participating in exciting sports programs, exploring nature, becoming involved in performing and creative arts, playing a part in group activities, and attending special events.

Our students will expand their horizons, embark on new adventures, and most importantly have fun. Our exceptional program and dedicated staff create an environment that forges lifelong friendships among our campers. We create a summer experience that is unforgettable!

Our program features a unique selection of indoor and outdoor activities and field trips that take advantage of resources in the local area.

## Special Features

- Quality staff
- Flexible, extended hours
- Field trips, special events
- Fun! Fun! Fun!

## Hours

**Monday-Friday** 9:00 am-3:00 pm

**Extended Care** 7:00 am - 6:00 pm

## Schedule (closed July 4)

<b>Week 1</b>	June 12 – 16	<b>Week 5</b>	July 10 – 14
<b>Week 2</b>	June 19 – 23	<b>Week 6</b>	July 17 – 21
<b>Week 3</b>	June 26 – 30	<b>Week 7</b>	July 24 – 28
<b>Week 4</b>	July 3 – 7	<b>Week 8</b>	July 31 – August 4





# Activity Blocks



## Summer Chef

Students learn kitchen fundamentals and culinary techniques as they slip on their aprons and create yummy snacks. They'll be a master chef in no time!



## Gadgets, Gizmos & Gears

Challenging and fun projects encourage collaboration, decision making, and innovation. Students work together to solve problems, while developing a love of math and science.



## Film/Photography

Students explore the tools necessary to capture great images and videos, and refine them through digital imaging.



## Art Frenzy

From painting, to sculpting, to drawing and more, campers are empowered to express their inner artist and let their imaginations soar.



## Science Solvers

Using extraordinary investigative skills, campers develop hypotheses and conclusions during fun science projects and experiments.



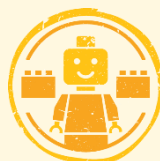
## Mission Possible

Children learn about how they can be heroes in their communities, and find creative ways to give back to those in need.



## Puzzled Out

Brain teasers, puzzles and riddles help students improve logic, reasoning, problem-solving, and math skills in an exciting way.



## Block Party

Dream it. Build it. Wreck it. Repeat! Students build elaborate objects, structures and vehicles, while exploring fundamental principles of engineering and physics.



# 2017 Summer Session Schedule



3 and 5 day options available  
Please indicate half, full or extended days

Half, Full or Extended	Camp Weeks	M	T	W	R	F
	<b>Week 1</b> June 12 – 16					
	<b>Week 2</b> June 19 – 23					
	<b>Week 3</b> June 26 – 30					
	<b>Week 4</b> July 3 – 7 <small>No Camp on July 4</small>					
	<b>Week 5</b> July 10 – 14					
	<b>Week 6</b> July 17 – 21					
	<b>Week 7</b> July 24 – 28					
	<b>Week 8</b> July 31 – August 4					

<b>Weekly Activity Fee</b>	\$15
<b>Registration Fee</b>	\$100

## Payment Policy:

Please register my child in Merryhill School-Henderson Summer Session 2017 for the weeks indicated above. **I understand that camp tuition is due on the first of each month for the camps I've selected.** I also understand that I am obligated to pay for all the weeks I have marked on this form, regardless of my child's attendance. (Camp tuition is NON-REFUNDABLE.) I also understand that camp will be closed Tuesday, July 4th, 2017, in observance of Independence Day.

\*Extended day hours are any 10 hours during the day (including the full day) from 7:00a-6:00p.

Checks Payable to Merryhill School.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Payment Policy: Your registration fee is required at time of enrollment to hold your reservation. Weekly camp fees are due the first of each month for that month and is subject to a \$25 late fee if not received by the 5th.

## Child Information

Name \_\_\_\_\_

Grade Completed \_\_\_\_\_

Date of Birth \_\_\_\_\_

Shirt Size (Y XS- Adult M) \_\_\_\_\_

## Deposit

Registration Fee \$100 \_\_\_\_\_ Paid \_\_\_\_\_

## Notes

Official Use Only: Payments Received:			
Registration	June	July	August
\$	\$	\$	\$
Ck #:	Ck #:	Ck #:	Ck #:

# CAMP REGISTRATION FORM



## Camper Information

Camper's Name \_\_\_\_\_ ☐ Male ☐ Female  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Camper's Birth Date \_\_\_\_\_ Age on June 1st \_\_\_\_\_ Grade in the Fall \_\_\_\_\_  
 Parent/Guardian 1 \_\_\_\_\_ ☐ Male ☐ Female Home# \_\_\_\_\_ Cell# \_\_\_\_\_  
 Email Address \_\_\_\_\_ Employer \_\_\_\_\_ Business# \_\_\_\_\_  
 Parent/Guardian 2 \_\_\_\_\_ ☐ Male ☐ Female Home# \_\_\_\_\_ Cell# \_\_\_\_\_  
 Email Address \_\_\_\_\_ Employer \_\_\_\_\_ Business# \_\_\_\_\_  
 Child in custody of (Please check one) ☐ Both parents ☐ Mother ☐ Father ☐ Other (Specify) \_\_\_\_\_  
 Child lives with (Please check one) ☐ Both parents ☐ Mother ☐ Father ☐ Other Specify \_\_\_\_\_  
 Does your child know how to swim? ☐ Yes ☐ No Do you give permission for your child to swim in camp programs? ☐ Yes ☐ No  
 Do you give permission for your child to attend and participate in all activities on camp field trips? ☐ Yes ☐ No

## Medical Information

Family Physician \_\_\_\_\_ Address \_\_\_\_\_ Phone# \_\_\_\_\_  
 Dentist/Orthodontist \_\_\_\_\_ Address \_\_\_\_\_ Phone# \_\_\_\_\_  
 Medical/Hospital Insurance Carrier (Note: Please submit a copy of insurance card) \_\_\_\_\_  
**Health History** – (Mark all that apply & provide copies of all immunizations) ☐ Ear Infection ☐ Convulsions ☐ Asthma ☐ Bleeding/Clotting Disorder  
 Allergies ☐ Pollen ☐ Poison Oak/Ivy/Sumac ☐ Penicillin ☐ Insect Stings (List Type) \_\_\_\_\_ Foods (List Type) \_\_\_\_\_ Other (List Type) \_\_\_\_\_  
 Operations, serious injuries, diseases, or restrictions on physical activity: \_\_\_\_\_  
 Current medication and purpose (all medication sent to camp must be given to camp director and labelled clearly with doctor's instructions) \_\_\_\_\_  
 Behavioral conditions or problems of which camp staff should be aware \_\_\_\_\_

## Child Release Authorization

In addition to Parent/Guardian names listed above, these person(s) have permission to pick up my child from camp. I understand that my child will not be allowed to leave with any person without authorization from Parent/Guardian, and that the person picking up my child will need to show identification.

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_ Relation \_\_\_\_\_ DL# \_\_\_\_\_  
 Name : \_\_\_\_\_ Phone#: \_\_\_\_\_ Relation \_\_\_\_\_ DL# \_\_\_\_\_

**Parent Authorization/Medical Release:** The information provided is correct to the best of my knowledge, and the person described has my permission to engage in all prescribed camp activities, except if noted by me. In the case of sickness or accident, I hereby give permission to the medical personnel selected by the camp representatives to order x-rays, routine tests, treatment, dental work, and necessary transportation for the recipient at my expense. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp representative to secure and administer treatment, including hospitalization, for my child as named above. This form may be photocopied for use away from the main program site. I authorize the NLCI staff to apply sunscreen to my child's exposed skin on an as needed basis—if child needs assistance. All photos that are taken of my child may be used for promotional purposes.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_