

1. Child Information:

First _____ Last _____ Gender: Male ___ Female ___
School Name _____ Grade _____ Age) _____ T-Shirt Size: _____ (adult or child)

Parent/Guardian - Contact Information:

Parent #1

First Name _____ Last Name _____
Address _____
City _____ State _____ Zip Code _____ Home Phone _____
Cell Phone _____ Work Phone _____ E-Mail _____
Occupation/Employer _____

Parent #2

First Name _____ Last Name _____
Address _____
City _____ State _____ Zip Code _____ Home Phone _____
Cell Phone _____ Work Phone _____ E-Mail _____
Occupation/Employer _____

2. Emergency Contact Information:

First Name _____ Last Name _____
Cell Phone _____ Relationship to child _____

First Name _____ Last Name _____
Cell Phone _____ Relationship to child _____

***In a medical emergency, and in the event you cannot be reached, can we contact your emergency contacts? Yes _____ No _____**

3. Alternate Pick-Up/Release Information:

Please list two other persons who are permitted to pick up your child. (NOTE: PHOTO ID WILL BE VERIFIED BY STAFF).

4. Medical Release and Insurance Information:

Health Insurance Provider _____ Policy Number _____
Primary Doctor _____ Phone _____
Address _____ Hospital Preference _____

2018 S.A.Y.A. DAY CAMP - REGISTRATION FORM

Camper Name: _____

Please list any medical problems, including any requiring maintenance medication (i.e. Diabetic, Asthma, Seizures):

<u>Medical Problem</u>	<u>Required Treatment</u>	<u>In an emergency, should EMT be called?</u>	
_____	_____	Yes	No
_____	_____	Yes	No

Is your child currently being treated for an injury, sickness, or taking medication for any reason? Yes _____ No _____

If yes, explain:

Is your child allergic to any type of food or medication? Yes _____ No _____

If yes, explain:

Does your child require a special diet? Yes _____ No _____

If yes, explain:

I understand that I will be notified in the case of a medical emergency involving my child and in the event I cannot be reached, I authorize the use of necessary medical services. If my family doctor cannot be reached, I authorize my child to be treated by Emergency Personnel.

Parent's/Guardian's Initials _____

I understand that the Northwest Detroit Youth Coalition (NWDYC) and its S.A.Y.A. Camp will not be held responsible for medical expenses incurred, but that such expenses will be my responsibility as the parent/guardian.

Parent's/Guardian's Initials _____

5. Tuition Information:

Tuition may only be paid by cash or certified funds (i.e. money order, cashier's check). Cashier's checks and/or money orders should be made payable to Corpus Christi Parish. All tuition for all eligible children must be paid by Friday, July 13, 2018. Campers with an outstanding balance after this date will not be allowed to attend camp and may be dropped from the program. **ALL PAYMENTS ARE NONREFUNDABLE.**

6. Camp Fees:

1st child - \$50 per week, \$200 for the entire Camp

2nd child - \$25 per week, \$100 for the entire Camp (*Sibling Discount*)

Each additional child is half the cost of the next child. For example: Child 1, \$200, Child 2, 100, Child 3, \$50, Child 4, \$25

A sibling is considered another family member living in the same household. Verification criteria will apply.

7. Registration Fee:

A nonrefundable registration fee of \$20 is due upon the completion of this application. The registration fee reserves your child (or children's) spot into our program.

Are you in need of a scholarship to cover some of the costs of camp? Yes No

I understand that the entire balance of camp tuition is due by Friday, July 13, 2018 and if I need more time to pay or a payment schedule, that this must be authorized in advance by the NWDYC Administration and/or the S.A.Y.A Camp Director.

Parent's/Guardians Initials _____

Camper Name: _____

8. Drop Off and Pick-Up Rules:

Parents should enter the church parking lot via Grand River or McNichols to drop off campers in the school. Please come in and sign in your child **DAILY** and when exiting the parking lot, please drive out of the Church parking lot **SLOWLY!**

9. Drop off time:

- 8:30AM (Breakfast)
- 9:00AM (Camp Begins)

10. Pick-Up Time:

- Pick-Up Time is at 3:30PM. Campers not picked up by 3:45PM, will be charged \$1 per minute (cash only), unless arrangements have been made for latchkey services in advance.

11. Friday Pick-Up:

Field Trips are on Friday and Camp will end at 3:30PM. If arrangements for latchkey have not been made in advance, the parent agrees to pay \$1 per minute after 3:45PM.

Parent's/Guardian's Initials _____

12. Latchkey:

Arrangements for latchkey need to be made with the SAYA Camp Director **in advance** of needing latchkey service. Morning latchkey begins at 8AM and afternoon latchkey is from 3:30PM to 5:00PM. Latchkey fee(s) will apply as follows:

- \$2/per day/per child, for **Morning Latchkey** only
- \$4/per day/per child, for **Afternoon Latchkey** only
- \$5/per day/per child, for **Morning and Afternoon**

Parent's/Guardian's Initials _____

13. Meals:

- Breakfast, lunch, and a snack will be provided to every camper, every day.
- We will do our best to accommodate your child's food allergies. However, it may be necessary to provide your child with an alternative food choice. If you send your child to Camp with food, please mark it with their first/last name.
- Refrigerators will be available for your child to store his/her food.
- Unhealthy food or snacks and fast food are highly prohibited as the basis of our camp is healthy nutrition.
- Glass bottles/containers are also not allowed.

Parent's/Guardian's Initials _____

14. Attendance Policy:

Daily attendance is expected. Our program is primarily funded by grants and they have the expectation that we serve as many youth as we can. Campers who fail to attend camp are likely taking the spot of another camper and this jeopardizes funding.

- Scholarship or Sibling Discounted campers who have not attended camp at least (3) days out of the week (Monday-Thursday) will be expected to cover the cost of the Field Trip on Friday (if attending).
- Scholarship or Sibling Discounted campers with less than 80% (4/5) attendance may be dropped from the program.
- Non-scholarship campers with poor attendance (less than 60%) may, be removed from the program as well.
- If there is a circumstance that prevents regular attendance, please notify the Camp Director in advance.

Parent's/Guardian's Initials _____

Camper Name: _____

15. Dress Code:

In an attempt to create a positive camping experience, we require that all clothing be modest and camp appropriate.

- Clothing that is not revealing (i.e. Halter Tops, bare midriffs, spaghetti straps, very short shorts).
- Strictly prohibit the wearing of clothing that is distracting, indecent, has inappropriate images or negative slogans.
- No sandals, crops, steel or open toe shoes - unless advanced communication and approval from Camp leadership.
- Each day, your child will engage in physical activity, fitness, and sports. It is imperative that they come to Camp ready to participate.
- The dress code will be enforced camp staff and campers not in proper attire will not be allowed in camp for the day.

Parent's/Guardian's Initials _____

16. Weapons, Discipline, Cell Phone, and Personal Belonging Policy:

- **NO WEAPONS are allowed at Camp!** A camper who brings a weapon (defined as anything that can cause physical bodily harm/pain/damage), will be removed from Camp immediately and the police will be called.
- Campers are expected to refrain from inappropriate conduct, offensive language, and disrespect to staff/volunteers.
- Violence or Bullying against a camper, staff, or volunteer will result in immediate dismissal from S.A.Y.A. Camp.
- **Students who have difficulty following directions will not be allowed to attend field trips unless chaperoned by a parent/guardian or responsible family member over the age of 18.**
- **Cell phones are strictly prohibited. If a cell phone is found on a camper, it will be confiscated and returned to the parent at pick-up. Two violations results in immediate dismissal from the program.**
- Personal belongings can be brought to camp. However, these items should be marked with the first and last name of the child with permanent marker. **Please Note:** SAYA Day Camp will not be held responsible for lost belongings.

Parent's/Guardian's Initials _____

17. Field Trips:

- Students will attend four (4) field trips. Three of the field trips will be on Fridays of the camp with one Field Trip (Detroit Metro Youth Day) being on Wednesday, July 11, 2018.
- **Tuition for camp also covers the expense for our Field Trips.**
- Field Trips are staffed by S.A.Y.A. Day Camp staff and parent volunteers.
- Permission slips will be made available on Tuesday and must be returned no later than Thursday morning.
- Costs will be covered for parents willing to chaperone.
- Parents bringing siblings not registered in the S.A.Y.A. Camp may be asked to cover the cost of that sibling.
- Campers who misbehave on a field trip may be excluded from subsequent field trips and parents may be asked to pick up their camper from the field trip site.

Parent's/Guardian's Initials _____

18. Initial one of the following statements below:

I hereby **give** permission to S.A.Y.A. Day Camp to photograph and/or videotape my child for educational, marketing, and promotional purposes. _____ **(Initial)**

I hereby **do not** give permission for S.A.Y.A. Day Camp to photograph and/or videotape my child for educational, marketing, and promotional purposes. _____ **(Initial)**

19. Transportation Release:

I hereby give permission for the transportation of my child for official **S.A.Y.A. Day Camp** activities by modes of transportation agreed on by the camp organizers.

Parent's/Guardian's Initials _____

20. Parent Statement of Understanding:

I hereby state that (**camper's name**) _____ is in good mental and physical health to participate in the S.A.Y.A. Day Camp, including but not limited to, all aspects of exercise, activities, physical fitness, and/or competition.

I am fully aware that any activity involving motion, athletic/physical activity, or range of motion exercises could result in an injury and therefore, I hereby hold harmless S.A.Y.A. Day Camp and its affiliates from any liability to the above named camper occurring on the premises of S.A.Y.A. Day Camp, Corpus Christi Parish, and/or Christ the King Catholic School and Church, including any event sponsored or sanctioned by S.A.Y.A. Day Camp and/or travel to and from such activities.

I further understand that S.A.Y.A. Day Camp has the right to deny admittance to any camper not meeting the standards of the program at their discretion.

In the event that my child engages in inappropriate conduct (including, but not limited to, disruptive, volatile, or violent behavior), S.A.Y.A. Day Camp has the right to make arrangements for the child's immediate dismissal from Camp.

I have agreed to all of the policies, procedures, and camp fees noted within this document.

Parent/Guardian Signature: _____ Date: _____

Printed Name: _____

For Office Use Only:

Scholarship: **Scholarship Amount:** **Sibling Discount:** **Approved By:** **Date:**

Provisions: