



PRESHOOL
SUMMER
CAMP
2019

Preschool Summer Camp

June 10-August 2

Join us for summer fun!
 We'll have art, music, dramatic play, kindergarten readiness activities,
 and lots of fun surprises!
 Campers bring a lunch everyday. Snacks are provided.
 Pick your days and weeks! (2 week minimum)
 Splish, Splash...waterplay on warm days.
 Group sing-a-long everyday!

REGISTRATION: \$100.00

Minimum \$100.00 non-refundable registration fee per camper is due at the time of registration. This amount will be subtracted from the total due upon final payment. The remainder of the camp fee is due one week prior to the start of camp.

***PLEASE NOTE: NO REFUNDS OR MAKE-UP CLASSES FOR MISSED DAYS.**

*Campers must be 2.5 years old and potty trained.

RATES

PICK 3, 4, or 5 days a week!

Weekly Rate
 9:00am-1:00pm
 3 day- \$150
 4 day- \$200
 5 day- \$250

Morning Care Rate (7:00- 9:00am)
 \$4.50 per day, per camper

After Care Rate (1:00pm-6:00pm)
 \$6.50 per hour

Please note:

The week of July 8-12 is camp organized and staffed by First Presbyterian Church and are separate fees that may require additional paperwork. Extended Day care will be available for both weeks by regular school staff.

FIRST PRESBYTERIAN PREPARATORY SCHOOL- Summer 2019

Parents' Authorization and Release For Emergency Medical and Dental Treatment

Birthdate _____ Last Tetanus Toxoid Booster _____

Allergies to drugs or foods _____

Any special medications or pertinent information _____

Telephones where parents/guardians may be reached:

Father/Guardian: _____
 Home _____ Business _____

Pager _____ Cell Phone _____

Mother/Guardian: _____
 Home _____ Business _____

Pager _____ Cell Phone _____

FINANCIAL RESPONSIBILITY _____

Health Insurance Company _____ Policy # _____

Family Physician _____ Phone # _____

Address _____

EXTENDED DAY CARE

Will your child need EDC?

EDC is available from 7-9am and 1-6pm. Please write approximate days, times and hours that you will be needing care. EDC is flexible and you will only be billed for hours used.

**FIRST PRESBYTERIAN PREPARATORY SCHOOL- Summer 2019
Parents' Authorization and Release
For Emergency Medical and Dental Treatment**

MINOR'S NAME: _____

I/We, the undersigned, am/are either or both parents, if both parents have legal custody, or the parent or person having legal custody, or the guardian, of _____, a minor, (the "Minor) and hereby authorize the faculty and administrative staff of the First Presbyterian Church of Granada Hills Preparatory School (collectively the "Authorized Persons") to consent to any X-ray examination, anesthetic, medical or surgical diagnosis or treatment, and hospital care for the Minor under the general or special supervision and upon the advice of or to be rendered by a physician and surgeon licensed under the California Medical Practice Act, and to consent to any X-ray examination, anesthetic, dental or surgical diagnosis or treatment, and hospital care for the Minor by a dentist licensed under the California Dental Practice Act. This authorization is given pursuant to the provisions of Section 6910 of the California Family Code, as amended. Each of the Authorized Persons may exercise the authority granted hereby individually and without the knowledge, consent or joint action of any other of the Authorized Persons.

It is understood that effort shall be made to contact the undersigned prior to rendering treatment to the Minor, but that any of the above treatment will not be withheld if the undersigned cannot be reached. The undersigned hereby request payment and assign any benefits due them under the terms of any policy or policies of insurance that may cover any hospital, physician and/or dentist services to be paid directly to the hospital, physician and/or dentist services to be paid directly to the hospital, physician and/or dentist billing for such services, but not to exceed the provider's regular charges for such services. The undersigned hereby authorize the release of the Minor's medical and dental records and of any other information necessary to act on the foregoing request and assignment.

The undersigned hereby accept personal responsibility to pay all hospital, physician and dentist charges and related emergency charges, and acknowledge that the undersigned, and not any insurance company, will be responsible for payment of all charges arising out of any medical care or dental care to which any of the Authorized Persons consents pursuant to this authorization.

This authorization shall be effective June 10, 2019 and shall remain in effect until August 2, 2019, when it shall expire.

Signed: _____ Date: _____
(Father/Guardian)

Signed: _____ Date: _____
(Mother/Guardian)

List any restrictions: _____

Date Signature of Mother, Father or Legal Guardian

Address

City State Zip

(OVER)

| | |
|---|---|
| <p align="center">Week 1: June 10- 14</p> <p align="center">Rainforest Adventure</p> <p>Journey down a jungle river, as we explore the tropical rainforest. Create a colorful parrot, learn about Madagascar hissing cockroaches, all while discovering why the rainforest is so important to our planet.</p> | <p align="center">Week 5: July 8-12</p> <p align="center">Vacation Bible School</p> <p>Join our church families! God's awesome power will guide us over obstacles with stories, crafts, songs and lots of surprises. This week will be led by adult volunteers. Extended day care, provided by FPP school staff, will be available.</p> |
| <p align="center">Week 2: June 17-21</p> <p align="center">Fizzle, Bubble, Pop and Edible Engineering</p> <p>Learning is sweet with science you can eat! Have some fun playing with your food. We will also do some fun hands on science experiments that will fizzle, bubble and pop!</p> | <p align="center">Week 6: July 15-19</p> <p align="center">Little Picasso and Mini Matisse</p> <p>We will paper collage like Matisse and paint portraits like Picasso! We will explore different media types including clay, pastels, and of course paint! Join us as we learn about different artists.</p> |
| <p align="center">Week 3: June 24-28</p> <p align="center">Around the USA in 8 days!</p> <p>Pack your bags and join us as we celebrate different states across the USA! Join us this week as we travel through Texas, Hawaii, Alaska, Louisiana and Arizona!</p> | <p align="center">Week 7: July 22-26</p> <p align="center">Shark Week</p> <p>We will become marine biologists as we visit the vast depths of the ocean. Join us as we become shark experts and learn all about these fascinating ocean creatures.</p> |
| <p align="center">Week 4: July 1-5</p> <p align="center">Around the USA in 8 days!</p> <p>We will finish our trip around the USA with our final destinations in California and New York!</p> <p>We will be closed on Thursday, July 4th and 5th in honor of Independence Day.</p> | <p align="center">Week 8: July 29-August 2</p> <p align="center">Under the Big Top</p> <p>Come one, come all, and join the greatest show on earth. Learn to tight rope, juggle, tame lions and tigers (and bears... oh my!).</p> |

**SUMMER CAMP REGISTRATION
2019**

Please CLEARLY PRINT all information below, with the most current contact names and numbers. Complete a separate form for each child.

Camper's Name _____ Birthdate _____

Please circle the days and weeks you will be attending.
(3, 4 or 5 days per week option only)

| | | | | | | | |
|---------------|---------------|---------------|---|---------------------|---------------|---------------|-------------------|
| June 10-14 | June 17-21 | June 24-28 | July 1-5 Holiday Closed 7/4-5 | July 8-12 VBS | July 15-19 | July 22-26 | July 29- Aug 2 |
| M T W Th F | M T W Th F | M T W Th F | M T W | M T W Th F | M T W Th F | M T W Th F | M T W Th F |

Address _____ City _____

Email _____ Home Phone _____

Father's Name _____ Wk Phone() _____ Cell () _____

Mother's Name _____ Wk Phone() _____ Cell () _____

Doctor's Name _____ Phone _____ Policy# _____

**Names of friends/relatives authorized to pick up your child.
Indicate if this person is also an emergency contact:**

Name _____ Phone() _____ Emergency Contact? Y N

Name _____ Phone() _____ Emergency Contact? Y N

Name _____ Phone() _____ Emergency Contact? Y N

All camp fees are due one week prior to the start of Summer Camp attendance. Parents are financially responsible for all the days that the camper has **registered** to attend.

Please notify the office if your camper is going to be absent for the day.

There will be **no refunds for missed days.** _____ (Parent Initials)

Minimum **\$100 non-refundable deposit** per camper is due at the time of registration. This will be subtracted from the total amount due at the time of final payment.

**FIRST PRESBYTERIAN PREPARATORY SCHOOL
PERMISSION TO BE PHOTOGRAPHED
SUMMER CAMP 2019**

Pupil's Name _____

First Presbyterian Preparatory School is occasionally asked for permission to photograph or videotape our pupils in their school activities. We comply only when we are assured that the pupils, school, and program are to be presented in a favorable and positive manner.

Please indicate below the procedure we should follow as regards to your son or your daughter. Please note: **names of children will not appear.**

PLEASE CHECK ONE

_____ My child may be photographed for any reason approved by First Presbyterian Preparatory School.

_____ My child may not be photographed for any reason by a person not employed by First Presbyterian Preparatory School.

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Our school website displays photographs of children in various activities at school. Please indicate below whether your child may appear in photographs used on the school website. Please note: **names of children will not appear.**

PLEASE CHECK ONE

_____ My child may appear in photographs used on the school website

_____ My child may not appear in photographs used on the school website.

_____ Mother/ Guardian Signature

_____ Date

_____ Father/ Guardian Signature

_____ Date