DECEMBER 23RD – JANUARY 6TH

Please check the days your child will be here

Monday 12/23

Tuesday 12/24

□ Thursday 12/26

□ Friday 12/27

Monday 12/30
Tuesday 12/31
Thursday 1/2
Friday 1/3

B

2019/2020

□ Monday 1/6

*In-Service Day

Winter Camp Rates										
Program	Rate	# of Weeks	Total Amount							
Student Camp 2 Day	\$135		\$							
Student Camp 3 Day	\$150		\$							
Student Camp 4 Day	\$185		\$							
In-Service Day (Monday 1/7)	\$20		\$							

*Tuition is due on Monday of each week. A late payment fee of \$30 is assessed at noon on the following business day.



School Age Camp Program

Camp Hours 6:30 am – 6:30 pm

Camper Information

Name

Current Grade _____

Date of Birth _____

Photo Consent _____



Allergies/Food Restrictions ____

Parent (Guardian)

Name						
Email Address						
EMERGENCY CONTACT #						
DateSignature:						

Reserve Your Space NOW!

School Age Winter Camp

KEEP THE KIDS ACTIVE WHILE SCHOOL IS OUT! Dec. 23rd – Jan. 6th

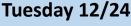
Xplor,

Reserve Your Space NOW! School Age Winter Camp

Monday 12/23

Twas' the Night Before Christmas

- Christmas Tree Cones
- STEM: Build Santa a Chimney; Solo Cup Christmas Tree
 - Christmas Carol Chaos
 - Christmas Tree Drawing Contest
 - Crafting Holiday Masks



Xplor.

- Candy Cane Land
- Peppermint Bark
- Minute to Win It Games: Candy Cane Pick Up; Peppermint Stack
- STEM: Dissolving Candy Canes; Candy Engineering
 - Candy Cane Paint

Dec. 23rd – Dec. 27th

Wednesday 12/25

Happy Holidays

SCHOOL CLOSED

Thursday 12/26

Jingle All the Way

- Minute to Win It: Jingle Bell Junk; Ornament Destruction
 - Paper Plate Christmas Tree
- STEM: Create a Jingle Bell Maze
 - Rice Krispy Santa Hat Treats
 Eiold Trin: Bowling
 - Field Trip: Bowling

Friday 12/27

Merry Grinchmas

- Pin the Heart on the Grinch
- Oven Mitt Present Unwrap
- Minute to Win It: Chopsticks & Marshmallows; Reindeer Line Up
- Craft Grinch Mask & Enjoy Merry Grinch Mix



Reserve Your Space NOW! School Age Winter Camp

Monday 12/30

Polar Bear Express

- Newspaper Polar Bear Craft
- Polar Bear Graham Crackers
- STEM: Marshmallow Engineering
- Minute to Win It: Snowball Toss

Thursday 1/2

Do You Want to Build a Snowman?

STEM: Marshmallow Igloos
 Winter Snowman Craft

Melted Snowman Sugar Cookies

Minute to Win It: Toilet Paper

Snowman; Snowman Toss • Field Trip: Obstacle Warrior Kids

Dec. 30th

Tuesday 12/31

Xplor.

Snow Day

- Making Fake Snow
- Growing Crystal Snowflakes
- Minute to Win It: Shoveling Snow
 - Name Art Snowflakes
 - Cinnamon Sugar Snowflakes

Friday 1/3

Penguin Huddle

• STEM: Icy Ramps Exploration; Ice

Fishing

- Paper Plate Penguin Craft
 - Penguin Bananas

- Jan. 3rd

Minute to Win It: Penguin Parents



Wednesday 1/1



CAMP REGISTRATION FORM



	Camper's Name					□ Male	🗅 Fema	e			
Camper Information	Address City					State _		Zip			
	Camper's Birth Date	Age on June 1s	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)	D Mother	🗅 Father	🗅 Other (S	Specify)						
	Child lives with (Please check one)	🗅 Mother	🗅 Father	🗅 Other S	pecify)						
	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										
	Family Development		ο ο ο ο ο ο ο ο ο ο								
nation	Family Physician										
	Dentist/Orthodontist Address Phone#										
	Medical/Hospital Insurance Carrier (Note: Please submit a copy of insurance card)										
for											
Ľ	Allergies 🗅 Pollen 🗅 Poison Oak/Ivy/Sumac 🗅 Penicillin 🗅 Insect Stings (<i>List Type</i>)Foods (<i>List Type</i>) Other (<i>List Type</i>)										
dical	Operations, serious injuries, diseases, or restrictions on physical activity:										
edi	Current medication and purpose (all medication sent to camp must be given to camp director and labelled clearly with doctor's instructions)										
Σ	Pakewierel conditions or problems of which completely should be swore										
	Behavioral conditions or problems of which camp staff should be aware										
0.5	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										
hild Release uthorizatior	any person without authorization from Parent/Guardian, and that the person picking up my child will need to show identification.										
	Name:		Phone#:		Rela	tion		D	L#		
	Name :	Phone#: Re			Rela	tion		D	L#		
04											

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: