

WINTER BREAK



2019/2020



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

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 # _____

Date _____ Signature: _____

Reserve Your Space NOW!



**School Age
Winter Camp**



KEEP THE KIDS ACTIVE WHILE SCHOOL IS OUT!

Dec. 23rd – Jan. 6th

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

Tuesday 12/24

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

Wednesday 12/25



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
 - 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

Dec. 23rd – Dec. 27th



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

Tuesday 12/31

Snow Day

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

Wednesday 1/1

**HAPPY
NEW YEAR**
SCHOOL CLOSED

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

Friday 1/3

Penguin Huddle

- STEM: Icy Ramps Exploration; Ice Fishing
 - Paper Plate Penguin Craft
 - Penguin Bananas
- Minute to Win It: Penguin Parents



Dec. 30th – Jan. 3rd



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: _____