

St. Catherine of Siena Summer Camp 2021

Registration Form



MISSION: St. Catherine of Siena Summer Camp seeks to provide an engaging, fun, and formative summer camp experience for children of the St. Catherine of Siena community entering PK4 through 7th grade. SCS Summer Camp is structured around organized and meaningful activities on the SCS campus including sports, arts & crafts, activities, swimming, and field trips.

DATES: Camp runs Monday – Friday each week from 9:00am – 3:00pm. Camp will run for seven weeks. The starting dates for each week are as follows: 6/7, 6/14, 6/21, 6/28, 7/6, 7/12, 7/19. No camp on 7/5. The last day of camp is 7/23.

COVID-19: We plan to follow all state, local, and church Covid-19 guidelines for summer activities. The parent information e-mail, which will be sent in late May, will give specific directives for these protocols.

COST: \$40 non-refundable registration fee for each camper reserves a spot for camp and includes two camp shirts, water bottle, and camp bag. This year camp will be priced based on the number of weeks you plan to buy. Weeks are pro-rated the more you buy and the first week costs \$185. See payment form for pricing information.

LUNCH & SNACKS: Campers can either bring their own lunch or purchase lunch daily from camp (provided by Pigeon Catering). Snacks (*chips, candy, etc.*) will be available on special days each week. Water is available throughout the day. PK & K campers receive a morning snack.

BEFORE & AFTER CARE: Before care is available daily from 7:30am – 8:45am; after care is available daily from 3:15pm – 5:00pm. Before and after care credits can be paid in advance for a pro-rated weekly rate. *Prepaid before and after care credits are non-refundable.* If a camper is not pre-paid, before and after care must be paid by the end of each week. The pre-paid price is \$4 per credit (one credit for each use before or after care). The daily price is \$6 per credit.

REGISTRATION: Registration must be paid in full to the SCS parish office by Tuesday, June 1. Registration is limited to 275 campers. Registrations submitted after June 1 may be subject to a \$50 late fee per camper.

CAMPER DRESS CODE: Campers should wear their official camp t-shirts each day. Additional t-shirts can be purchased during registration. Shorts, athletic shoes, and socks are also required every day. Hats are acceptable. Sunscreen is also highly recommended but must be applied before arrival.

CAMP VIRTUES & CAMPER AWARDS: Each session counselors and staff will select campers of the session based on the camp virtues (*humility, teamwork, respect, joy*). Awards will be given out for each group to the camper who best exhibits the camp virtues. Camp will begin each day with prayer.

DROP-OFF & PICK-UP: Drop-off will take place daily from 8:45am – 9:00am. Pick-up will take place from 3:00pm – 3:15 pm. Parents should place a sign in their car with the last name of the camper to be picked up. Location of drop-off and pick-up will be determined by Covid-19 guidelines for summer activities. The parent information e-mail will update these procedures.

DEVICES AND VALUABLES: SCS summer camp limits the use of technology at camp. Devices such as portable video games, cell phones, cameras, etc., are not allowed at camp. Campers should also not bring valuable items to camp. SCS will not be responsible for lost or damaged items brought to camp.

NUT ALLERGIES AND GUM: Please be mindful when packing lunches and snacks to refrain from products with nuts in them. Due to campers with nut allergies, SCS summer camp strives to be a nut free camp. Chewing gum is prohibited at SCS summer camp.

CAMPERS ARRIVING LATE & LEAVING EARLY: Parents should pull up to the gate near the Barrett ramp on Bonnabel Blvd. and call the camp office at 831-2688 when dropping a child off after 9:00am or when picking a child up before 3:00pm. A member of the camp staff will escort the child to the car.

PARENT INFORMATION: In late May all families who have registered will receive an e-mail will further instructions regarding camp procedures. We will update parents regarding Covid-19 guidelines in this e-mail.

CAMP DIRECTOR: The camp director is Mr. Matt Orillion and can be reached at camp@scschurch.com. Camp phone number is (504) 831-2688.

CAMP ACTIVITIES (pending Covid-19 guidelines):

- **Field Trips** –Campers will take field trips to kid-friendly locations such as trampoline/bounce venues, laser tag, sports gyms, etc.
- **Visiting Activities** – Activities will be brought to campus such as mazes, video games, drones, etc.
- **Fridays** – Fridays will either be a field day or water day full of fun group activities, bounce houses, water slides, sno-balls, or pep rally.
- **SCS Campus** - Most of the SCS campus will be used for camp with various activities in each location, especially the cafeteria, gym, field, and blacktop.
- **Groups:** Groups will be divided up by grades. Middle school grade-level groups will be divided into boys and girls groups.
- **Swimming:** Campers in 3rd – 7th grades will swim once per week. Campers will be administered a swim test before being allowed to free swim.

Junior High Volunteer Service Program: Students who are entering 8th-10th grade can apply to enter the volunteer service program. Students who are accepted can earn service hours and will help with activities and sports at camp. Fill out the program application found on the parish website (www.scschurch.com).



St. Catherine of Siena
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ABLAZE WITH LOVE



St. Catherine of Siena Summer Camp 2021 – Payment Form

Registration fee required to reserve spot(s). Full payment due by June 1, 2021. Submit this form with payment. Make checks payable to St. Catherine of Siena. Keep a copy for your records.

Camper Name (list all): _____

Parent/Guardian Name: _____

Total Weeks	Cost
1	\$185
2	\$365
3	\$540
4	\$710
5	\$875
6	\$1035
7	\$1190
8	\$1340
9	\$1485
10	\$1625
11	\$1760
12	\$1890
13	\$2015
14	\$2135
15	\$2250
16	\$2360
17	\$2465
18	\$2565
19	\$2660
20	\$2750
21+	\$2835

A. Registration fee: \$40/camper x
 _____ campers =

Registration total \$:

B. Camp Weeks:
 Child 1 # of weeks: _____
 Child 2 # of weeks: _____
 Child 3 # of weeks: _____
 Total # of weeks = _____

Weeks total \$:

Use the grid to the left to determine the cost for the total # of weeks you are purchasing.

C. Additional T-shirts: \$10/shirt x
 Child 1 # of shirts: _____ & size: _____
 Child 2 # of shirts: _____ & size: _____
 Child 3 # of shirts: _____ & size: _____

Total Extra T-shirts \$:

D. Pre-paid Before and After Care
 Note that 1 credit is \$4 per child and can be applied to either before or after care (going to before *and* after care on the same day would use 2 credits per child.)

Before Care Credits total \$:

Total # of before care credits: _____ x \$4 =
 Total # of after care credits: _____ x \$4 =

After Care Credits total \$:

Total \$ due:

Total \$ paid (date _____):

Balance due June 1:

Name on Check:
Check #:
Staff Notes:
Balance paid:

SCS Summer Camp 2021 - Emergency Information Form

Submit one form for each camper with payment to the parish office at 105 Bonnabel Blvd.

Please print single sided. Forms and payment due by June 1, 2021.

Camper Name: _____
(Last) (First) (Middle)

Age: _____ Grade entering '21-'22: _____ Gender: M F

Camper attends SCS School: _____ Member of SCS parish: _____

Pigeon Catering Lunch #: _____
(SCS school children)

T-shirt Size (yxs-adult xl): _____

Weeks Attending:

- _____ Week 1 (6/7-6/12)
- _____ Week 2 (6/14-6/18)
- _____ Week 3 (6/21-6/25)
- _____ Week 4 (6/28-7/2)
- _____ Week 5 (7/6-7/9)
- _____ Week 6 (7/12-7/16)
- _____ Week 7 (7/19-7/23)

Parent 1: _____

e-mail: _____

cell: _____

Parent 2: _____

e-mail: _____

cell: _____

Emergency contacts other than guardians/Adults allowed to pick up campers:

Name	Relation to camper	Phone
1. _____	_____	_____
2. _____	_____	_____

List any information concerning your child's medical or physical condition (medications, allergies, ailments, etc.) that camp staff should know about (attach additional info is necessary):

Medical Insurance Coverage

Name of provider: _____

Provider's Address: _____

Policy Holder's Name: _____

Policy/Group Number: _____

Family Physician: _____ Phone #: _____

Address: _____

Parental Consent: I hereby give written permission for my child to attend summer camp at St. Catherine of Siena Parish. As a parent/guardian, I do hereby authorize the treatment by a qualified and licensed medical doctor in an emergency which, in the opinion of the attending physician, may endanger his/her life, cause disfigurements, physical impairments, or undue discomfort if delayed. Enrolling a student into the St. Catherine of Siena Summer Camp constitutes the consent of his parents/guardians for the student's name, voice or likeness to be used in news publications, audio-visuals, and other electronic transmissions including the St. Catherine of Siena website.

Parent Name: _____ Date: _____

Parent Signature: _____