

SESSION 1: June 24 – July 12

SESSION 2: July 15 – August 2



FIELD TRIPS • WATER PLAY •ARTS & CRAFTS • ORGANIZED GAMES • SWIMMING SPECIAL GUESTS • PERFORMING ARTS • AND MUCH MORE...

# ABOUT YES

Camp Hours: 9am – 4pm

**Club O.T.** (Before and After Care):

7:30 – 9am – Free (includes breakfast)

4 - 6pm - \$100/six weeks\* (includes snack)

4 – 6pm \$75/three weeks\* (includes snack)

\*Late Fees will be assessed. (See General Information)

**Ages:** Rising **K** through **10**<sup>th</sup> Grade

### FULL-DAY CAMP RATES:

\$900\* for six-week session

\$525\* for three-week session

\*Includes T-shirt, meals, all activities and much, much more...

### **Extended Day Care (4-6pm):**

\$100/six-week session

\$75/three-week session

## Registration Ends: Friday, June 7th

1/4 tuition due by May 1, 2013

1/2 tuition due by May 30, 2013

3/4 tuition due by June 15, 2013

Tuition balance due by June 28, 2013

\$25 late fee will be applied to delinquent payments (late assessment not to exceed \$50)





### Financial Aid Options:

- 1. Multi-camper discount
- 2. Multi-tier tuition scale, based on household income
- 3. CFR/TANF

### Complete Registration Packet includes:

- Completed Registration Form (Signed and initialed in all designated areas)
- Medical History/Copy of current immunization records
- 3. Non-refundable Registration Fee
- 4. Signed Permission Slip

#### **Return completed packet to:**

CCDC Youth Enrichment Summer Camp 10 Martin Luther King Avenue Morristown, NJ 07960

<u>In-Person Drop-Off</u> – Bring the completed packet to the main office on the second floor of the above address, Monday – Friday between 9am-3pm or 7pm-9pm (Willow Street Entrance).

**By Appointment:** Email the camp at <u>yes@ccdcmorristown.org</u> or call the camp office to schedule an appointment at 973-267-0136, x210.

REFUND POLICY: (Registration Fee is not refundable) 100%\* of tuition on or before April 1<sup>st</sup> 50%\* on or before June 7<sup>th</sup> 0% after June 7<sup>th</sup>

\*All requests for refund must be made **IN WRITING** and received by the dates indicated above.

<sup>\*</sup>Incomplete registration packets will be returned

### 2013 Youth Enrichment Summer Camp Registration Form/Emergency Form/Health History

10 Martin Luther King Avenue, Morristown, NJ 07960 973-267-0136 x210 (office) – 973-898-1971 (fax)

yes@ccdcmorristown.org

### NOTE: Incomplete forms will be returned; use a separate form for each camper!

Camper's Name					
Nickname	Birth Date/ G	rade entering in September 2013			
Full Mailing Address					
T-shirt Size:ch smallch med	iumch largeadult small	adult mediumadult large			
Mother's Name	Email				
Home Phone	_ Cell Phone	Work Phone			
Employer	_ Occupation	Work Hours			
Father's Name	Email				
Home Phone	_ Cell Phone	Work Phone			
Employer	_ Occupation	Work Hours			
Camper's Living Arrangements During Camp: ( ) Both Parents ( ) Mother ( ) Father ( ) Other					
REQUIRED: A copy of my child's m	ost current immunization record	is <u>attached</u> . Initial			
Those authorized to pick-up child if	a parent/guardian cannot be read	ched immediately (must be 18 or older):			
Name	Relationship	_ Phone No			
Name	Relationship	_ Phone No			
Who may not pick up the child?					
Child's Doctor or Clinic		Phone No			
Address	Medical Insurance	: ID			
Preferred Medical Facility for Emerger	ncy Treatment				
Allergies:	Medication prescribed:				
Epipen Required? Yes No Med	dication to be taken daily while at ca	mp:			
		n to the Health/Recreation Coordinator Inquire at the sign in desk for form.)			
Medical/Orthopedic/Emotional/Learnin	g Conditions?				
If so, please explain		Date of Last Physical://			
This health history is complete and ac	curate to the best of my knowledge.	Initial			
I hereby enroll my child in Youth En	richment Summer Camp. In signin	g this application, I certify that he/she is			

Initial\_\_\_\_

healthy and free of problems that could adversely affect him/her or other youth.

Camper's Name			
I understand that my child mus may terminate my child's partice. Church in Morristown, New Jer responsible for lost, stolen or contravel to or from the church we youth once they leave the presinherent risks of injury to my chrides, and water rides.	sipation in the camp if he/size (CBC), and Calvary (camaged personal articles ithout supervision or authemises. I understand and	she does not maintain these s Community Development Co . CBC and CCDC do not assi orization. CBC and CCDC as acknowledge that participatio	tandards. Calvary Baptist orporation (CCDC) are not ume the risk for youth that sume no responsibility for n in the activities involves king, bus, amusement park
			Initial
I hereby grant <b>CCDC</b> and its a child's health and safety, and I to contact the undersigned imm payment of all medical and medical	fully release them from any nediately, in the event of a	y liability. I understand that pru	dent attempts will be made
I have applied for CFR or T Apply the multi-camper disc		_ campers.	
Names: 1	2	3	
I have attached a financial a	aid application complete w	ith requested information.	
Rising K – 10 <sup>th</sup> Graders		·	
6 weeks, 2 sessions <b>(\$900)</b>	\$225 due <b>May</b> 1		
June 24 – Aug. 2	Add \$25 late fee to each not to exceed \$50		
3 weeks (choose 1 session) *			
June 24 <sup>th</sup> – July 12 <sup>th</sup>	\$131.25 due <b>May 1</b> <sup>st</sup>	\$131.25 due <b>May 30</b> <sup>th</sup>	
July 15 <sup>th</sup> – Aug. 2 <sup>nd</sup>	\$131.25 due <b>June 15</b> <sup>th</sup> _	\$131.25 due <b>June 28<sup>th</sup></b>	
	Add \$25 late fee to each not to exceed \$50	delinquent payment,	
*Upgrade from 1 to 2 session	s on/after June 24 <sup>th</sup> – add	d \$525 (tier) <u>due upon change</u>	
Club OT AM (Before Care 7	:30-9am)		FREE
Club OT PM (After Care 4-6	pm) _	\$100/six-week session	
	_	\$75/three-week session	
One-time, non-refundable One-time, non-refundable			\$50 \$75
Registered before April 1 <sup>st</sup>	Apply \$7	5 early registration discount	()
Make checks payable to: Calv	ary Community Developme	nt Corporation TOTAL DUE	
I understand the tuition fees sch	nedule.		Initial
I authorize <b>CBC</b> and <b>CCDC</b> to on this application as needed in <b>CCDC</b> are not-for-profit organize	n promotional materials ar	nd public relations programs. I	understand that CBC and
I agree to indemnify <b>CBC</b> and <b>C</b> loss, damages, claims, liabilities			
The above information is accumulating, of any changes.	ırate. I understand that it	is my responsibility to notify	the camp immediately, in Initial
Signature of Parent or Legal (	Guardian:		_ Date



(Please Print Name)

# Youth Enrichment Summer Camp

# 2013 Permission Slip

### ONLY ONE CHILD PER PERMISSION SLIP (copy if necessary).

I give my child (print clearly)	permission to attend the Youth
Enrichment Summer (YES) Camp and to part	cicipate in all activities and field trips, destinations subject to availability,
enrollment and weather conditions, including,	but not limited to:
Walking fie	eld trips within five miles of the YES Camp location
Weekly sw	·
Bowling	
Liberty Scie	ence Center
Roller Skati	ing
Bronx Zoo	– New York
Camelbeac	h Mountain Waterpark – Pennsylvania
Dorney Par	k – Pennsylvania
including, but not limited to, the above name 24, 2013, and conclude on August 2, 2013, an	ly in all planned activities, programs, recreation, outings and field trips d unless I specify otherwise. I understand that the camp will start on <b>June</b> d my child's participation will depend upon his or her specified registration e for incidental costs associated with each field trip, which shall be my sole camp facility is my sole responsibility.
health and safety, and I fully release them fro	uthority to take whatever actions they deem necessary regarding my child's m any liability. I understand that prudent attempts will be made to contact f an emergency. I understand that I will be responsible for payment of all
waive, release and forever discharge any a Community Development Corporation, Youth Jersey, and each of their officers, directors,	I to participate in the camp experience and applicable field trips, I hereby and all rights and claims any of us may hereafter have, against Calvary Enrichment Summer Camp, Calvary Baptist Church in Morristown, New employees, affiliated companies and agents for any and all damages and e out of, or result from my child's participation in the camp activities and
days.) Lunches should be in a brown paper	hild with a bag lunch. (Lunch will not be provided by the camp on field trip bag, clearly marked with child's full name and grade. All items should be ff will not be responsible for non-disposable items.
YOUR CHILD WILL NOT BE	PERMITTED TO GO ON THE TRIPS WITHOUT THIS SLIP.
Parent/Guardian Signature:	Date:



# Youth Enrichment Summer Camp

### Medical Authorization Form

Dear YES Camp Family,

To ensure proper administration of medication for every child, medications will be administered at the *designated times of 11:30 AM and 3:30 PM daily*. We ask that parents modify other dosages around this schedule. The camp will call for all children authorized to receive medication at these designated times, which will provide for more effective management of medication administration. It is much less likely that the administration of medication will be missed if we have specific times that we administer versus the multiplicity of dosage times for the many children we currently serve. Please see the Health/Recreation Coordinator if your child has any special medical needs. PLEASE HAND DELIVER PERSCRIPTION MEDICINES TO BE GIVEN TO YOUR CHILD TO THE GROUP LEADER. He/she will place it in the refrigerator or in the medicine cabinet and notify the Health/Recreation Coordinator.

The following must be provided for dispensing: medication provided in its **original bottle with** prescription label, child's own medicine apparatus labeled with child's name and contained in a labeled Ziplock bag, correct dates, precise times and all blanks filled in.

Child's Full Name:	Date:			
Child's Condition for administering medication:	_ Cold	Sore Thoat	Injury	_ Rash
ImmunizationsEar Infection Othe	?r (explain)			
Name of medication and/or perscription number				
Refrigeration necessary Yes No Amount	to be given_			
Dates to be given: Beginning		Ending		
Time medication is to be given: (circle one)	.1:30 AM	3:30 PM		
Special Instructions:				
I authorize the YES staff to administer medication to	my child.			
Parent/Guardian Signature				



# Youth Enrichment Summer Camp

### What's Included...

Camp T-shirt

**Drawstring Bag** 

Nutritious and delicious meals prepared daily, except for lunch on field days.

#### **Special Events:**

Birthday Bash

Olympic Day

Family Day and more!!

**Special Guest Visits** 

Weekly Trips: (See Permission Slip)



### Also Includes:

Morning Assembly, Small Group Activity,
Outdoor Activities, Blast From The Past (History Program), Crazy
Crafts/Special Camp Activity, Brain Tease, YES Camp's Got Talent,
Creative Writing, Closing Circle and Walking Field Trips within 5
miles of camp.

- ★ LOW, AFFORDABLE TUITION
- ★ STUDENT/TEACHER RATIO: 10 TO 1
- ★ CHILDREN GROUPED BY GRADE
- ★ EXPERIENCED, WELL-TRAINED STAFF

IN
TRAINING
(CIT)
(LEADERSHIP
CAMP)
RISING 8TH -10TH
GRADERS

This is a leadership development program for 8th-10th graders. CIT members will have the opportunity to work, play learn servant leadership as well as gain valuable knowledge and experience from our qualified staff. Weekly leadership workshops on conflict resolution, team building, troubleshooting, interviewing skills, working with children, and much, much more!!! CIT also includes all regular and special camp programming and the opportunity to earn community service credits.

### GENERAL INFORMATION

#### **REGISTER BEFORE**

#### **APRIL 1st**

### **RECEIVE \$75 TUITION DISCOUNT**

- Once the registration fee and forms have been completed and submitted with all necessary documentation, you will not hear from us unless the class is full. In that case, you will be notified that your child has been added to the wait list. If the registration forms are incomplete, they will be returned without notice.
- Campers are expected to act in ways that demonstrate love, respect and consideration for the
  rights and needs of others and conform to the rules of YES Camp. If your camper is unable or
  unwilling to do so, he or she will receive restrictions, suspension or dismissal from the camp.
- Campers arriving from other summer programs after 12pm must report to the Camp Administrator upon arrival at the church.
- Camp drop-off and pick-up will be located at the Willow Street entrance (side) of the facility.
- Late fees: campers left after 15 minute grace period for the end of Camp (4 PM if not enrolled in Club OT), will be assessed \$25 late fee per child up to \$100 per child; or, the end of Club OT (6 PM, if enrolled in Club OT) will be assessed \$15 late fee per child up to \$75 per child. (This fee must be paid by the Friday of the week in which the fee was incurred. Unpaid late fees will be reason for suspension from camp and or field trip.)
- Campers not picked up by 6:30 PM will be released to the proper authorities.
- You may switch from 3 to 6 weeks of camp at any time prior to the start of the second session of camp. Switches on or after June 24th will incur additional tuition at the \$525 tier. Payment in full is due at the time of the change in order for your child to be able to attend the 1st day of the second session of camp.
- Tuition is not prorated by week.

#### PARENT ORIENTATION

Mahalia Jackson Fellowship Hall
Saturday, June 15, 10-11AM
Meet Camp Staff ● Hear Camp Updates
ENTER FOR A CHANCE TO WIN

**5%** • **10%** • **15%** Tuition Discount