



Zion Summer Camp 2019

We are excited for another year of fun during our summer camp at Zion Lutheran Church & Preschool! Your child will participate in music, crafts, indoor and outdoor play, and bible stories. Zion summer camp is open to **fully** potty trained children that will be entering Prek 3 in the 2019-2020 school year through children that will be entering second grade for the 2019-2020 school year. If your child is entering Prek3, but isn't fully potty trained, they can attend our Wee School Summer Camp. Each child will need to bring a change of clothes, water bottle, snack, and lunch **ALL LABELED WITH THEIR FIRST AND LAST NAME.**

Please fill out a separate registration form for each child. Additional forms are available in the preschool office. An **\$80 non-refundable**, **non-transferrable** registration is due at the time of registration. The hours are 9:00am-1:00pm at a cost of \$110 per week. Camp payment is due the Monday **BEFORE** your child attends camp by 9:00am. If we do not receive your payment by this time, your spot will be given to a child on the waiting list.

Extended care is available from 7:00am-6:00pm at a cost of \$5.50 an hour.

*Discounted rate for week of July 4th- \$80 for July 1-3 (closed July 4-5)

NO CAMP THE WEEK OF AUGUST 5-9. SCHOOL STARTS AUGUST 12TH.

REGISTRATION DATES:

April 16th: Currently attending families

April 22nd: Families enrolled for 2019-20 School Year

April 29: General Public

Child's Name: _____

Child's age: _____ Date of birth: _____

Last school grade completed: _____

Email: _____

Please check the box of dates your child will be attending.

- My child will be attending camp every week (June 10- Aug 2)
- June 10-14 Ocean/Under the Sea
- June 17-21 Superhero
- June 24-28 Circus/Carnival
- July 1-3* America (closed July 4-5)
- July 8-12 STEM
- July 15-19 LEGO
- July 22-26 Zoo Animals
- July 29-Aug 2 Pirate & Princess



Zion Lutheran Church & School

16161 Marsh Road
Winter Garden, FL 34787
Office@ZionWG.org
407-656-5751

Application for Enrollment Summer Camp 2019

Cash _____ CK# _____ Reg. Date pd. _____

Full (legal name of child) _____

Nickname: _____ Date of Birth: _____

Sex: _____ Phone: _____

Child's Address: _____

City: _____ State: _____ Zip: _____

Email(s) _____

Family Information (if same as child write SAME)

Mother's Information:

Father's Information:

Name: _____ Name: _____

Address: _____ Address: _____

Phone #'s: _____ Phone #'s: _____

Employer: _____ Employer: _____

Custody Mother _____ Father _____ Both _____ Other _____

Medical Information: I hereby grant permission for the staff of this facility to contact the following medical personnel to obtain emergency medical care if warranted.

Doctor: _____ Phone: _____

Dentist: _____ Phone: _____

Hospital: _____

Allergies, special medical or dietary needs, or other areas of concerns: _____

Church Now attending: _____

Church Denomination: Father _____ Mother _____

Siblings Names and Ages: _____

Any information you would like to share with your child's teachers: _____

Others living at home with child: _____

Child Baptized ____ Date: _____ Location: _____

How did you hear about Zion Lutheran Church and School? _____

Emergency Contacts: Child will be released only to the custodial parents or guardians and the following people. If a parent or guardian cannot be reached in case of illness or emergency the following people may also be contacted.

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Registration and Tuition Agreement

I hereby make application for the admission of my child at Zion Lutheran Church & School Summer Camp. I understand that the Registration fee is to accompany this application and is **non-refundable** and **non-transferable**. I further understand that I must pay my child's camp fees by 9 AM on the Monday BEFORE my child attends camp to secure my child's spot. I also understand that camp runs from 9 AM-1 PM and my child can attend Extended Care at an additional charge as stated on the Camp Brochure. 24 hours notice is required to use or cancel Wee School Camp Extended Care.

Section 7.3, of the Childcare Facility Handbook, requires that parents receive a copy of the Child Care Facility Brochure, " Know your child Care Facility: (CF/PI 175-24), or

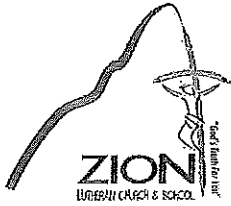
Section 2.8, of the Child Care Facility Handbook, requires that parents are notified in writing of the disciplinary and expulsion policies used by the child care facility.

Your signature below indicates that you understand and have received the above items and that the information on this enrollment form is complete and accurate. I hereby grant permission for the staff of this facility to have access to my child's record.

Signature of Parent/Guardian _____ Date _____

Printed Name of Parent/Guardian _____

PERMISSION TO USE PHOTOGRAPHS



Child's Name: _____

Date of Birth: _____

Zion Lutheran Church & School photographs or videotapes children in various programs. These photos are generally used for in-school displays and family newsletters. At times we would like to use them for church publicity such as displays for exhibits, brochures, newsletters, local news publications, website, etc.

Please indicate your permission for Zion Lutheran Church & School to photograph or video your child by initialing below on the appropriate lines.

_____ I give Zion Lutheran Church & School permission to use my child's pictures and videos for in-school displays and programs.

_____ I give Zion Lutheran Church & School permission to use my child's pictures and videos for School advertisements (brochures, flyers, magazine ads, etc.).

_____ I give Zion Lutheran Church & School permission to use my child's pictures and videos on their website.

_____ I give Zion Lutheran Church & School permission to use my child's pictures and videos for social media.

OR:

_____ I **DO NOT** give Zion Lutheran Church & School permission to photograph or video my child.

I understand that I may revoke permission to use photographs/video at any time by contacting Zion Lutheran Church & school at 407-656-5751 or office@zionnewlife.com.

Parent/Legal Guardian: _____

Date: _____



Zion Lutheran Church & School Food Activities Permission Form

DCF requires that we have written permission in your child's student file for them to participate in school activities that contain food products. In order for your child to participate, we must have this form signed and on file.

In our preschool environment, we learn through play. At times, we learn through food crafting, experimenting with food products, and celebrate holidays and special occasions with food. In order for your child to participate in these classroom learning activities, we must have your permission. Please choose **one** of the options below.

I _____ **give** permission for _____
(parent/guardian) (student)

To participate in classroom projects and celebrations that use food products and where food products will be consumed. My child's allergies, etc. have been made known in writing to Zion New Life Preschool and my child's teacher is aware of what my child can and cannot consume.

I _____ **DO NOT** give permission for _____
(parent/guardian) (student)

to participate in classroom projects and celebrations that use food products and where food products can be consumed.

Signature

Date