

St. Gregory the Great Academy's Summer Camp 2017



St. Gregory the Great Academy will be offering our 8th annual summer camp experience for students who will be entering Preschool 3 through Grade 5 in September 2017. Summer Camp 2017 will begin on **Monday, June 26, 2017** and run through **Friday, August 18, 2017**, and will encompass 8 themed weeks. The **CUBS** Division will be for students entering Preschool 3, Preschool 4, and Kindergarten in September 2017, while the **LIONS** Division will be for students entering Grades 1-5 in September 2017. For both divisions, students may be registered by the day; however, **PREREGISTRATION IS REQUIRED**. Both divisions also offer a half day (7:30-12:00) and a full day (7:30-5:30) option.

CUBS General Schedule

7:30-9:00: Arrival/Table Time/Prayer
9:00-9:30: Circle Time
9:30-10:00: Activity #1
10:00-10:30: Snack Time (Students Bring)
10:30-11:30: Free Play
11:30-12:00: Activity #2
12:00-1:00: Lunch (Students Bring)
1:00-2:00: Rest Time
2:00-3:00: Outside Time
3:00-3:30: Snack Time (Students Bring)
3:30-4:00: Story Time
4:00-4:30: Electives/Toys/Coloring
4:30-5:30: Closing Activities/Pick Up

LIONS General Schedule

7:30-9:00: Arrival/Agenda Setting/Prayer
9:00-10:00: Activity #1
10:00-10:30: Snack Time (Students Bring)
10:30-12:00: Sports/Water Fun
12:00-12:45: Lunch (Students Bring)
12:45-1:30: Activity #2
1:30-2:00: Outside Time
2:00-2:30: Reflection Time
2:30-4:00: Electives - Crafts/Sports & Nature/Educational Activities
3:30-4:00: Snack (Students Bring)
4:00-4:30: Outside Play
4:30-5:30: Closing Activities/Pick Up

Our camp is run by the staff of our Extended Day Program and are approved employees of St. Gregory the Great Academy.

Summer Camp 2017

Student Registration Form

Student Name: _____ Current Homeroom _____

Circle Tee Shirt Size: Youth - S M L Adult - S M L XL

Day Information: Enter "F" on the line to select full days; enter "H" on the line to select half days. Half day students need to bring a morning snack; full day students need to bring a morning snack, a lunch, and an afternoon snack.

Week 1: June 26-June 30 M_____ T_____ W_____ Th_____ F_____

Week 2: July 3-July 7* M_____ W_____ Th_____ F_____

*Camp is closed on Tuesday, July 4, 2017

Week 3: July 10-July 14 M_____ T_____ W_____ Th_____ F_____

Week 4: July 17-July 21 M_____ T_____ W_____ Th_____ F_____

Week 5: July 24-July 28 M_____ T_____ W_____ Th_____ F_____

Week 6: July 31-August 4 M_____ T_____ W_____ Th_____ F_____

Week 7: August 7-August 11 M_____ T_____ W_____ Th_____ F_____

Week 8: August 14-August 18 M_____ T_____ W_____ Th_____ F_____

CUBS (entering Pre 3, Pre 4, or Kdg): \$70.00 per full day; \$40.00 per half day

LIONS (entering Grades 1-6): \$50.00 per full day; \$30.00 per half day

\$350.00 deposit (or full payment if your total amount due is less than \$350.00) is due with your registration. Registrations received prior to March 31, 2017 will be guaranteed placement and choice of days.

There is NO separate registration fee aside from the deposit

Summer Camp 2017

Payment Form

Student Name: _____ Current Homeroom _____

Parent Email (for confirmation and billing purposes): _____

Camp Fee - CUB

of Full Days x \$70.00 = \$ _____

of Half Days x \$40.00 = \$ _____

Total Camp Fee = \$ _____

- OR -

Camp Fee - LION

of Full Days x \$50.00 = \$ _____

of Half Days x \$30.00 = \$ _____

Total Camp Fee = \$ _____

A \$350.00 deposit (or full payment if your total amount due is less than \$350.00) is due with your registration. Registrations received prior to March 31, 2017 will be guaranteed placement and choice of days.

There is NO separate registration fee aside from the deposit

Credit Card Information - Circle One: **Charge Deposit** **Charge Full Amount**

Card Number _____ Exp _____

Name on Card _____ Billing Zip Code _____

Cardholder Signature _____

Summer Camp 2017

Tentative Weekly Themes

Week 1: Every Heart Beats True for the RED, WHITE AND BLUE!

Week 2: Life is a Beach!

Week 3: Let's Take a Trip Around the World!

Week 4: Let's go Camping!

Week 5: Ahoy Matey!

Week 6: It's a Bug's Life!

Week 7: Fun in the Sun!

Week 8: Hula on Over for Some Tropical Fun!



There will be an age appropriate trip and/or a special event each week; specifics will be announced as soon as the schedule is confirmed.

Past trips have included: Jersey Shore Pirate Adventure, iPlay America, Colonial Bowling, Mercer Country Park, Howell Living Farm, Skyzone, and Pump it Up.

Past special events have included: KidzArt, Insectropolis, Discovery Museum, Camp Breakfast, Soccer Shots, Magic Show, and the Closing Luau.



St. Gregory the Great Academy

A Ministry of the Church of St. Gregory the Great

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Dr. Jason C. Briggs, Principal

Web: www.stgregorythegreatacademy.org

Mrs. Michele L. Rivera, Assistant Principal

SUMMER CAMP 2017 EMERGENCY INFORMATION FORM

Child's Name: _____ Age: _____

(Must complete a separate form for each child in the program)

Full Home Address: _____

Date of Birth: _____ Home Phone # _____
(Month, Day, Year)

Parent Email Address: _____ Alternate: _____

Mother's Name: _____ Cell #: _____

Mother's Employer: _____ Work #: _____

Father's Name: _____ Cell #: _____

Father's Employer: _____ Work #: _____

Check Parents' Marital Status: Married Separated Divorced

If separated or divorced, who does the child primarily reside with? Mother Father

If there are any custody restrictions, check here and explain below; attach more paper if necessary. Please also attach a copy of any existing restraining orders.

Additional Pick-up Authorization: Provide the names of two reliable adults who you give permission to pick up your child from CAMP:

Name: _____ Contact #: _____ Relationship _____

Name: _____ Contact #: _____ Relationship _____



A 2014 National Blue Ribbon School of Excellence

CAMP HEALTH HISTORY INFORMATION

Must be fully completed or registration will be returned to you

Child's Name: _____ Age: _____

Name of Child's Doctor: _____ Phone #: _____

Name of Child's Dentist: _____ Phone #: _____

Allergies (Check all that apply):

Peanuts Tree Nuts Hay Fever Wheat/Grain
 Penicillin Play Dough Insect Sting Dairy
 Other (specify) _____ No known allergies

Please explain any special instructions for your child's allergies: _____

An epi-pen is prescribed for my child: No Yes (must send one in for use at camp)

Medical History (Complete any applicable sections):

Surgery/Serious Injury: _____ Date of Occurrence: _____

Surgery/Serious Injury: _____ Date of Occurrence: _____

Disability or Chronic/Recurring Illness: _____

Specific Restrictions: _____

Emergency Permission Release

There is always a possibility that a child may be injured or become seriously ill during the SUMMER CAMP PROGRAM and that we may not be able to contact the parents. **Medical aid cannot be given to a child without his/her parent's consent.** In an emergency, time can be vital. Your signature on this permission release, which is kept on file at CAMP, will allow for medical aid in case such an emergency occurs and we are unable to reach you immediately. We pray it will never be necessary to use this permission.

I give permission for my child _____, grade _____, to be transported to a Hospital Emergency Room for medical aid in the case of extreme emergency, provided I cannot be contacted when the emergency occurs.

I prefer my child be taken to: RWJ/Hamilton Hospital Other _____

Please indicate which parent should be called first in an emergency: Mother _____ Father _____

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

St. Gregory the Great Summer Camp

2017



Dear Parent/Guardian:

St. Gregory the Great Academy Summer Camp would like to highlight our campers and staff during activities and trips in various external media outlets. (Only Facebook – Summer camp page and on occasion St. Gregory the Great Church page)

Last year, I made a Facebook page just for Summer Camp (a closed group). Parents truly enjoyed this page so I will be doing it again this summer. This page will be private and I will monitor who is able to become friends with the page. This page allows us to show all the wonderful things your children are doing throughout the day. This also allows us to showcase our trips and visitors with you.

The children have such a great time at camp and are making such special memories. As parents you only hear about what is happening but we'd love to show you, and what better way to show you than through pictures.

RETURN THIS FORM TO HAVE YOUR CHILDREN'S PHOTOS PUBLISHED AS FOLLOWS:

St. Gregory the Great Summer Camp

_____ **I WILL ALLOW** my child/children's photo to be posted on the closed Facebook page for St. Gregory the Great Academy Summer Camp and on occasion St. Gregory the Great Church page.

_____ **I DO NOT** agree to allow St. Gregory the Great Academy to use photographs or the names of my child/children on the St. Gregory the Great Academy Facebook page

Names & Grade of Student(s): _____

Email: _____

Signature & Date: _____