



2023
GENESEE ACADEMY
Summer Program

Information Packet
and Registration

Early Registration Due By May 20th

Registration Due by June 10th

Late Registration anything past first week of camp

Submit Registration Packets to the Main Office until June 24th

(810) 250-7556 Fax

Email me at apalmer@gaflint.org after June 24th

Dear GA Summer Camp Families,

Thank you for your interest in our summer day camp! Our program is designed to give your child an exciting and enriching summer experience under the supervision of trained and experienced leadership. We look forward to sharing this special time with your child.

We are planning on another great summer with lots of fun activities for all ages. Our summer camp is theme based and filled with many activities. Each week we offer something new for the kids to learn. Literacy, science experiments, arts and crafts, water play, quiet reading time and outdoor play are just a few activities for our campers to participate in. We will also have the **Formar Nature Preserve, Flint Children's Museum, Flint Institute of Art and Sloan Museum** visit throughout the summer.

Summer camp is from **June 13th to August 17th** (Tentative), the last week is tentative based on the start date for the new school year. Camp will be **closed June 29 through July 4th**. We charge \$35 per day. (Plus registration fee). We do give a small discount for students enrolled in FIC camp this is upon request and only includes 3rd through 5th grade

Daily Routine Schedule

	Camp Gator			Little Gators
	1st through 4th grade			Ages 3- 5
8:20	Choice time		8:20	Choice time
9:00	Quran & Islamic Studies (Tentative)		9:30	Snack
10:00	Snack		9:45	Quran & Islamic Studies (Tentative)
10:30	Outside		10:00	Special Guest/Camp Activity
11:00	Special Guest/Camp Activity		11:00	Outside
12:00	Lunch		12:00	Lunch
12:30	Reading/ Journals		12:30	Rest time
1:00	Art		1:30	Art
2:00	Gym		2:00	Gym
2:30	Snack/Dhur Prayer		2:30	Snack
3:00	Outside		3:00	Outside
3:30	Wind down		3:30	Wind down

Drop-off and Pick-up

Staff will be available for drop off starting at 8:20 am. Please walk your child to the door. Ring the doorbell outside the summer camp classroom door (the door to the right of the ELC's main entrance) . If you come at a later time, please check the schedule to verify where we are in the building. Please pick up your child no later than 4:00 pm. Park in the ELC lot and ring the classroom doorbell. The main entrance will be closed for the entire month of July.

When to Keep Your Child Home

Sick children should not be brought to the summer camp program. If a child is too sick to go to camp or play outdoors, then the child should not come to the building. Sick children will be sent home and parents will be contacted to come pick them up. It is especially important this year to keep your sick child home in order to prevent closure of our summer camp.

Water Bottles

Students will be required to bring water bottles from home. These water bottles should be labeled with the students name and should be filled each morning

Snack

We provide a healthy morning and afternoon snack.

Lunch

Your child will need to bring lunch everyday. Please label their lunch with their full name and date. We require children to bring healthy lunches.

Outdoor Recess

The children will be going out for recess **every day** unless it is raining or the temperature is above 95 degrees. Please keep in mind when helping your child select clothing and shoes for the day to have them wear comfortable clothes. This will allow them to actively engage in all types of play. **Sunscreen, hats and sunglasses** should be provided for your child and a sunscreen permission slip must be signed before applying any form of topical spray or cream.

Dress Code

Students above the age of five must come dressed modestly. No shorts or tank tops are allowed during summer camp. Students above the age of five, may wear short sleeve shirts and clothing below the knees. Please make sure to provide prayer attire if needed.

Discipline

We believe all our students can follow the rules of the camp. It is the teacher's job to redirect the students to achieve the desirable outcome. Students are not always equipped with techniques to use when they are confronted with a difficult or challenging situation. It is our job as educators to teach these strategies so students can apply and use them during social interactions. However, we do have simple rules within the classroom that will be introduced. Our first job as teachers is to keep all students safe so we can all have fun together.

Registration Instructions:

You must complete the following application (pages 5-10) and provide the forms listed:

- Application fee \$50 Per Child (if submitted by May 20th)
- Application fee \$75 Per Child (if submitted after May 20th)
- Complete Application (one per family)
- Sunscreen Form (one per Family)
- Playground Waiver (one per Family)
- Medical Emergency Form (last page of application packet, one per child)
- Parent ID and child birth certificate or child's passport (any student new to Genesee Academy)
- Immunization record (any student new to Genesee Academy)
- Health Appraisal completed by a pediatrician (any 3-5 years old student new to Genesee Academy)

Please note that application does not guarantee admission

Admission Procedure:

- Admissions form completed in full for all students must be returned to the school office.
- In order for this application to be considered, the office must have all items listed above.
- Children must be between 3 years of age (potty trained) and entering 4th grade in the fall.

Student Information:

- | | | | |
|----------|-----------------------|-------------------|-------------|
| 1. _____ | Grade Entering: _____ | Birth Date: _____ | Gender: M/F |
| 2. _____ | Grade Entering: _____ | Birth Date: _____ | Gender: M/F |
| 3. _____ | Grade Entering: _____ | Birth Date: _____ | Gender: M/F |
| 4. _____ | Grade Entering: _____ | Birth Date: _____ | Gender: M/F |

Current Address: _____

City, State, and Zip: _____

Home Phone: _____ E-Mail Address: _____

Primary Language spoken: _____ Other Languages: _____

Student Lives With: • Both Parents • Legal Guardians • Mother • Father

(Print the name): _____

Parent Information:

Check for the box for what phone will need to get the text from the Remind app

- Father's Name: _____ Cell Phone: _____
- Mother's Name: _____ Cell Phone: _____

Other Information:

Use the space below to provide any other information about the student that might be helpful to the school.

Genesee Academy Camp Program Fee Agreement Summer 2023

Genesee Academy Summer Program depends on tuition, please help us fulfill the needs of your child(ren) by paying tuition on time. **Payment is due the Thursday of the week prior to camp scheduled week. If not paid we will not reserve your child's place for the upcoming week.**

Checks returned by the bank for non-sufficient funds or accounts closed must be replaced immediately with an additional \$35 service charge. If these funds are not replaced within five working days, we may require the future payments by money order or cashier's check.

	Ages	Rate
Camp Gator	Students in 3 grade to 5th	\$35 per scheduled day, must sign up previous week
Little Gator	1st grade and 2nd	
Gator in Training	Per Day (3-5 years old) Potty Trained	
Late fee	Per Scheduled Hr and or 15 min delay	\$5

Summer Camp Dates- Please circle the dates you are interested in

Week #		
Full Summer	Monday -Friday	Please make dates your child will be attending
Week 1	June 13th (Tuesday)	T-F T W Th F
Week 2	June 19th	M-F M T W Th F
Week 3	June 26 Closed 29 & 30th	M-W M T W
Week 4	Closed July 3rd & 4th July 5	W-F W Th F
Week 5	July 10th	M-F M T W Th F
Week 6	July 17th	M-F M T W Th F
Week 7	July 24th	M-F M T W Th F
Week 8	July 31st	M-F M T W Th F
Week 9	Aug 17th	M-F M T W Th F
Week 10	Aug 14	M-Th M T W Th

I agree to pay a fee of:

Student name(s): _____

Grade: _____

Student name(s): _____

Grade: _____

Student name(s): _____

Grade: _____

Student name(s): _____

Grade: _____

Total tuition to pay: \$ _____

I have read this Enrollment Agreement carefully and have reviewed the school policies and agree to all of the terms stated.

Signature of Parent or Guardian

Date

Genesee Academy Summer Camp Release Form

Dear Parent/Guardian:

A picture of your child(ren) or work created by your child(ren) may be included in a classroom project. We may use the resulting project in one or more of the following ways:

- Use as demonstration project/activity in educational workshops, classes, and/or conferences.
- Use as a sample project/activity on CDs created by Genesee Academy for use in educational workshops and student classrooms.
- Post work on the school website or Internet.
- Submit as samples to program publishers or as grant and contest entries.
- Use portions of the project(s) on a recording made during a student presentation of the project or in broadcasts or recording demonstrating computer media in general.

Please initial each of the following statements to which you agree:

I give permission to:

- _____ Post a picture of my child(ren) on the GA website (first name may be posted with it)
- _____ Post work/projects created by my child(ren) on GA website
- _____ Post my child(ren) name on a list of awards, recognitions, etc.
- _____ Use my child(ren) work as examples in other schools, workshops, or conferences.

Student Name(s):	_____	Grade: _____
	_____	Grade: _____
	_____	Grade: _____
	_____	Grade: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Permission to Apply Sunscreen

Name of Child: _____

Name of Child: _____

Name of Child: _____

Name of Child: _____

As the parent/guardian of the above child/children, I recognize that too much exposure to UV rays may increase my child's risk of getting skin cancer someday.

Therefore, I give permission for the staff at: Genesee Academy Summer Camp,

(Check the one that applies)

- ☐ to apply a sunscreen product
- ☐ to assist child in applying sunscreen
- ☐ to allow the child to apply sunscreen
- ☐ if for medical or other reasons, please do NOT apply sunscreen to the following areas of my child's body: _____

- I will **provide sunscreen** for my child that is broad spectrum with SPF 15 or higher.
- I understand that sunscreen may be applied to exposed skin, including but not limited to the face (except eyelids), tops of ears, nose, bare shoulders, arms and legs.
- I understand it will be applied when he/she will be playing outside.

Parent/Guardian's Name: _____

Parent/Guardian's Signature: _____ Date: _____

Genesee Academy - Early Learning Center

Playground Waiver

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

In consideration of allowing my child to participate in activities associated with the Genesee Academy Early Learning Center (ELC), I/we shall release, waive, discharge and covenant not to sue the ELC, their agents and employees, from all liability from any and all loss or damage and any claim or demands thereof on account of injury to the person or property or resulting in death of the name participant except in the case of gross or willful wanton negligence of the ELC, its agents and employees or otherwise while the named participant participates in the playground at the ELC. I/we further agree to indemnify the ELC, their agents and employees from any and all liability mentioned above, including paying all reasonable attorneys' fees to defend or pay judgment of such claims.

I/we am (are) aware that participation on the playground may present a strain on my child's body, and I/we represent to the ELC, that to the best of my knowledge, my child is in proper physical condition to allow him/her to participate and that I/we assume the risk of participating. I acknowledge that I have received information concerning the playground, including the absence of medical personnel on site. I/we understand that in case of injury or illness, I/we will be notified. If it is impossible to contact me and it's an emergency, I/we hereby give permission to the attending physician to treat, hospitalize, administer medications, administer anesthesia or to order injections or surgery for the safety of my child. I/we further agree the privileges may be revoked upon any participants at the sole discretion of the supervisor. I/we, the parent or legal guardian, the undersigned, have read this release and understand all its terms. I/we execute it voluntarily and with willful knowledge of its significance. I/we have executed this release on this date indicated next to my name.

Childs Name: _____

Childs Name: _____

Childs Name: _____

Childs Name: _____

Parent/Guardian Signature: _____ Date: _____

GENESEE ACADEMY MEDICAL EMERGENCY FORM SUMMER 2023*** Please fill out a separate sheet for each child ***

Student	Last Name,	First Name	Birth date	Grade
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Home Phone	Address	City	Zip Code
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Name of Father	Work Phone	Cell Phone
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Name of Mother	Work Phone	Cell Phone
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Email address: _____

If parents cannot be reached, list neighbors or relatives who will assume temporary care of your child:

Name	Relationship	Home Phone	Work Phone	Cell Phone
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Name	Relationship	Home Phone	Work Phone	Cell Phone
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IF NONE OF THE ABOVE PARTIES CAN BE CONTACTED, I INSTRUCT THE SCHOOL TO CONTACT:

Physician _____ Phone # _____

Dentist _____ Phone # _____

Hospital of Preference _____ Phone # _____

Health Insurance _____ Policy # _____

If the designated parties are not available, I understand appropriate emergency care deemed advisable by school authorities will be sought.**Any existing health problem(s) or special directions appropriate to my child have been checked below:**

Contact lens/glasses

Diabetes

Seizure disorder

Asthma

Critical Allergies:

Bone/Joint condition

Hypertension or high blood pressure

Heart condition

Special blood condition

Medications needed or used:

None Known

Other condition or problem:

Your signature authorizes the school to place this health information on a confidential medical list. This list is distributed to all staff concerned with your child and informs them of your child's needs.

Name of Parent/Guardian (Printed): _____

Signature: _____ Date: _____