



St. Patrick

CATHOLIC SCHOOL

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Dear Parents & Guardians:

Registration for summer camp 2017 has begun! St. Patrick Catholic School is excited to offer a full time Catholic based specialty summer program with extended day options both before and after camp hours to meet your family needs. We also have options for half day camping options. You can sign up for one week or be with us the whole summer! Our camps will be offered for those children age 4 (fourth birthday must be before the start of the camp week) through students entering 7th grade. Those entering 8th grade can inquire about being a junior camp leader.

There will be a new thematic experience each week with the goal of learning and developing new skills while having a great time! Our diverse camp options will be run by the St. Patrick Catholic School faculty and staff in a small safe Christian environment that will challenge and guide your child throughout the summer.

To register for summer camp, you must return the following attached forms: camp session sheet, student information sheet, waiver form and parent contract. If you are not already registered at St. Patrick Catholic School you may need to provide physical and immunization records as well. A non-refundable 2017 Summer Camp deposit fee of \$75 is also required to hold your child(ren)'s spot. This deposit will be credited to your camp payment. Camp tuition is due the Friday before the week your child is registered for camp, and is payable either by check or cash. Please drop-off payment at the school office.

A separate form must be filled out for each child that will be attending camp. Camp space may be limited and spots will be filled as registrations come in. Please see below for fee structure for the St. Patrick Catholic School 2017 Summer Camp.

Summer Camp Registration Deposit Fee \$75

(non-refundable – credited towards weekly camp fee)

Summer Specialty Camp Tuition: For children age 4 through rising 7th graders.

Half Day – 8:00 AM – Noon \$75/week

Full Day – 8:00 AM – 3:00 PM \$125/week

Extended Day A.M. – 7:00 AM – 8:00 AM Free for paid campers

Extended Day P.M. – 3:00 PM – 6:00 PM \$10/day (\$50/week)



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2017 St. Patrick Catholic School Summer Camp Schedule

Check which camp your child will be attending and circle full or half day.

- Full/Half Day June 5th – June 9th – Drama Camp. Lights, Camera, Action!! This summer join a cast of thousands and be a part of directing, acting, creating sets, and putting on a show of a lifetime. Camp week run by Mrs. Lori Mendelsohn.

- Full/Half Day June 12th – June 16th – Cooking Camp. BAM!! Kick it up a notch helping you develop basic skills in the kitchen from boiling eggs to cheese fondue! As delicious as it is fun! Camp week run by Ms. Deb Hendrick.

- Full/Half Day June 19th – June 23rd – Art Camp. Let your creativity run wild with this exciting week of art. We will cover a variety of mediums from paint to pottery. Camp week run by Mrs. Julie Wintermeier.

- Full/Half Day June 26th – June 30th – Vacation Bible School. Sing, dance, and play your way through this exciting week of learning bible stories that will bring out the best in your child. Camp week run by Mrs. Erin Galley.

- Full/Half Day July 3rd – July 7th – Summer Fun! Think of all the great summer fun that you could have in a week. This will be a week full of activities like a picnic in the park to fun playground games! Camp week run by Mrs. Patty Ruppel.

- Full/Half Day July 10th – July 14th – Sports Camp I – Spend the week learning the rules and skills of different sports and have fun doing it. Camp week run by Coach Joe Harty.

- Full/Half Day July 17th – July 21st – Technology Camp – Spend the week learning about and how to use technology through various mediums. Maker spaces, coding basics, etc. Camp week run by Mr. Bob Tassinari.

- Full/Half Day July 24th – July 28th – Sports Camp II – Spend the week learning the rules and skills of different sports and have fun doing it. Camp week run by Coach Justin Trowbridge.



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2017 St. Patrick Catholic School Summer Camp Parent Contract

I, _____, the undersigned parent/guardian of
_____ (child's name) understand the following: **(Please
Initial)**

- ___ I can make payments for camp monthly or weekly.
- ___ I will pay by the Friday before the week of my child(ren)'s summer camp session.
- ___ My child will be unable to attend if payment has not been made in advance.
- ___ If I am using the extended day program and do not pick up my child by 6:00 PM, I will be charged \$1.00 per minute for each minute past 6:00 PM. If this occurs more than once, my child may no longer be allowed to utilize extended day.
- ___ Lunch will not be provided and must be packed for my child each day.
- ___ If my child becomes ill and misses three or more days in a camp week, I can be refunded half of my camp fees for that week.
- ___ If I need to cancel a camp that I have registered for, I need to cancel a week in advance, otherwise the full charge will remain on my child's account.

Read and signed on this _____ day of _____ 2017.

Parent Signature



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2017 St. Patrick Catholic School Summer Camp Student Information Sheet

(Please return no later than May 1st)

Child's Name: _____ Date of Birth: _____

Grade completed: _____

Medical Needs/Allergies: _____

Parent/Guardian Name: _____ Phone Number: _____

Parent/Guardian Name: _____ Phone Number: _____

Mailing Address: _____

Email address: _____

People, other than parents/guardians, that have permission to pick up my child.

Emergency Contact Name: _____ Phone Number: _____

Emergency Contact Name: _____ Phone Number: _____

Parent/Guardian Signature

Date

FOR OFFICE USE ONLY:

- Camp Deposit Fee
- Camp Session Sheet
- Student Information Sheet
- Waiver Form
- Physical and Immunization Form
- Parent Contract



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2017 St. Patrick Catholic School Summer Camp Waiver Form

Name: _____

Address: _____

Phone Number: _____

Email Address: _____

I give permission for my child, _____, to participate in the 2017 St. Patrick Catholic School Summer Camp program.

General: I hereby request and give permission for my youth to participate in the above event. I understand and assume the risks inherent with this event from other parties, but I also understand that all reasonable care and supervision will be exercised to provide for general well-being of my youth. I, individually and on behalf of my youth named above, do hereby release, covenant not to sue, and save harmless: The Most Rev. Gregory Parkes, Bishop of the Diocese of St. Petersburg; the above school; and the employees, and volunteers for the event, from any and all claims for any and all harm arising to my youth as result of their participation in this event.

Medical: ___ I request the school representative obtain medical treatment for my youth in the unlikely event of injury or illness during this event and I agree to pay any expenses incurred for such treatment.

Please list any information about your child (allergy, medication, special needs, or health condition):

Emergency Contact: _____ Phone Number: _____

In case of an emergency, I give permission for my child to receive medical treatment.

Parent/Guardian Signature

Date

State of Florida
County of Pinellas

On the _____ day of _____, 20____, before me came _____, to me known to be the individual described in and who executed the foregoing instrument and acknowledged that he/she executed the same.

Notary Public



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2017 St. Patrick Catholic School Summer Camp Food Experience Permission Form

I give permission for my child _____ to participate in food related activities.

Please check one of the following:

____ My child DOES NOT have a food allergy or dietary restriction.

____ My child DOES have a food allergy or dietary restriction. He or she may participate, but may not eat or handle the following items (please list below)

____ My child DOES have a food allergy or dietary restriction. He or she may not participate in activities.

Parent/Guardian Signature

Date