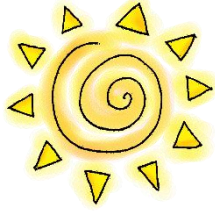
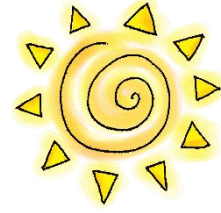


# CAMP PINECREST SUMMER 2024



**10400 SW 57<sup>th</sup> Avenue  
Pinecrest, Florida 33156  
(305) 666-3377  
Children ages 2-8**



Tuition and Fees: Non-refundable registration fee for all campers: \$80.00 (includes one CAMP PINECREST T-Shirt)  
All campers will receive a snack. Parents must provide lunch. *Hot Lunch Fridays* will be offered for an additional charge.

\_\_\_\_\_ Half-Day \$190.00/wk (8:45 AM-12:45 PM) OR \_\_\_\_\_ Full-Day \$292.00/wk (8:45 AM-3:15 PM)

Please check all that apply: Come for one week or all six weeks – you choose!

\_\_\_\_\_ Week 1 (June 17-21)      \_\_\_\_\_ Week 2 (June 24-28)      \_\_\_\_\_ Week 3 (July 1-5)\*  
\_\_\_\_\_ Week 4 (July 8-12)      \_\_\_\_\_ Week 5 (July 15-19)      \_\_\_\_\_ Week 6 (July 22-26)

\*Please note that Camp is closed on July 4<sup>th</sup>

## **Student Information:**

Name: \_\_\_\_\_  
Last First Middle Nickname

Child's Address: \_\_\_\_\_  
Street City State Zip Code

Date of Birth: \_\_\_\_\_ Gender: M F Age: \_\_\_\_\_ Potty-Trained? \_\_\_\_\_ Child lives with: \_\_\_\_\_

T-Shirt Size: \_\_\_\_\_ 2T \_\_\_\_\_ 3T \_\_\_\_\_ 4T \_\_\_\_\_ XS Youth \_\_\_\_\_ S Youth \_\_\_\_\_ M Youth

Office Use Only:  
T-Shirt Given - \_\_\_\_\_  
Initials/Date

## **Family Information:**

Parent's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City, ST, Zip Code: \_\_\_\_\_

City, ST, Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cellular Phone: \_\_\_\_\_

Cellular Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Custody: \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Both \_\_\_\_\_ Other

Please list the names and ages of all siblings: \_\_\_\_\_

Religious Affiliation/Name of local organization: \_\_\_\_\_

Helpful Information about your child: \_\_\_\_\_

**Contacts:** Children will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident, or emergency, if for some reason the custodial parent or legal guardian cannot be reached. All contact persons must be 18 years of age or older and will be required to show photo ID before your child will be released to them.

\_\_\_\_\_  
Name Relationship Phone Number

\_\_\_\_\_  
Name Relationship Phone Number

\_\_\_\_\_  
Name Relationship Phone Number

**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. I also give permission to transport my child by ambulance if the situation warrants.

Doctor \_\_\_\_\_ Address \_\_\_\_\_ Phone: \_\_\_\_\_

Hospital Preference: \_\_\_\_\_

Please list all allergies, special medical or dietary restrictions, or other areas of concern: \_\_\_\_\_

**ALL REGISTRATION FEES ARE NON-REFUNDABLE**

Camp fees are due in full no later than the Friday before each camp week. Pinecrest Presbyterian Day School may terminate any child's camp enrollment agreement at any time and/or at the sole discretion of Pinecrest Presbyterian Day School if the parent/child/school partnership is creating a negative effect upon the child, other enrolled children, the camp and/or its staff, or the church and/or its staff.

**LATE PICK UP FEES:**

For children in our Half-Day Camp Program, there will be a charge of \$22.00 per day past 1:00 PM.

For children in our Full-Day Camp Program, we do not have after care. There will be a late charge of \$5.00 per minute after 3:20PM for the second and third occurrences. There will be a late charge of \$10.00 per minute for the fourth and fifth occurrences. ANYONE LATE MORE THAN FIVE TIMES WILL BE ASKED TO LEAVE THE PROGRAM.

We reserve the right to refuse admittance to our facility for any child not currently enrolled.

Parent/Legal Guardian Signature \_\_\_\_\_

**PINECREST PRESBYTERIAN DAY SCHOOL DISCIPLINE POLICY:**

It is our intent to ensure that age appropriate, constructive disciplinary practices are used for children in our care. There is to be no severe, humiliating, physical or frightening disciplinary action taken with our children. Children may be asked to sit next to the teacher when exhibiting inappropriate/harmful behavior. Discipline will not be associated with food, rest, or toileting. There will be no corporal punishment. Role-play and discussion of correct behavior may be employed. In extreme cases of misbehavior parents will be contacted to pick up the child. Parents will be informed of their child's misbehavior in order to develop positive social growth within the child.

Section 65c-22.006(4)(c) 2F.A.C. and Section 402.3125(5)F.S. require that parents must receive a copy of the Child Care Facility Brochure, *Know Your Child Care Facility* and that the parents are notified in writing of the disciplinary practices used by the child care facility. The parents' or legal guardian's signature below verifies receipt of the childcare brochure and that the parents or guardians have been notified in writing of the disciplinary practices of the childcare facility.

Parent/Legal Guardian Signature \_\_\_\_\_

**HEALTH AND SAFETY:**

Health Forms: In accordance with Section 65C-22.006 (2), F.A.C., we require a current immunization record (DH 680 Form) and physical examination (DH 3040 Form) before your child is admitted into our Summer Camp. WE REQUIRE ALL IMMUNIZATIONS AND PHYSICALS TO BE KEPT CURRENT THROUGHOUT CAMP. We do not accept Religious Exemptions (Form DH 681). Any exemptions must be medically related (Form DH 680 Part C). All exemption forms will be reviewed by Administration before acceptance.

The health of all students is our greatest concern. Please keep your child at home if he/she has a fever, diarrhea, body rash, vomiting, symptoms of conjunctivitis, impetigo, head lice, green runny nose or other communicable disease or condition. Children must be sign and symptom free of all contagious illnesses for a period of 24 hours without medication before returning to camp; 48 hours if a fever is present due to Covid precautions. If your child develops any of these symptoms while in camp, you will be called to pick up your child. It is expected that you will pick up your child within one hour of notification. Please have someone on your pick-up list available to come quickly in such an emergency.

If your child contracts any communicable disease such as Covid-19, flu, fifths, chicken pox, measles, conjunctivitis, pinworms, head lice etc., please notify us immediately so we may take appropriate precautions and, if necessary, notify other parents accordingly. During the 2009 legislative session, a new law was passed that requires childcare facilities, family day care homes and large family childcare homes to provide parents with information detailing the causes, symptoms, and transmission of the influenza virus. The parents' or legal guardian's signature below verifies receipt of the *Influenza Virus, The Flu, A Guide for Parents*.

Parent/Legal Guardian Signature \_\_\_\_\_

**NUTRITIONAL STATEMENT:**

I understand that lunch is not provided by the center & agree to provide the noon meal to meet my child's nutritional & dietary needs. The camp will provide morning & afternoon snacks. *Hot Lunch Fridays* will be offered for an additional charge.

Parent/Legal Guardian Signature \_\_\_\_\_

I/We understand and agree to the above policies.

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_