New and Returning Camp Parents,

Please read and keep for reference on Camp St. Ed's parent information.

There will be a limit on the number of students attending Camp, so the sooner your registration form is returned the better chance your child/children have to attend. Students <u>entering grades</u> <u>TK-6th in the fall of the 2024-2025 school year</u> are eligible to attend. Your child/children must be registered St. Edmond students.

Camp is open from 7:30 to 4:30. **Please have your child picked up no later than 4:30**. <u>Camp closes at 4:30</u>. You may pick your child up earlier if it fits your schedule. A.M. drop off times can vary our main activities do begin around 9:00.

Children need to bring their own lunches and water (please have their name on their items). Morning and afternoon snacks with milk are provided. We do go outside to play, please feel free to send sunscreen with your child. Our workers will help them apply it before we go out.

*** Camp begins on Tuesday, May 28th and ends on Friday, July 26th. We will be closed July 1st thru July 5th for our 4th of July summer break. ***

The cost of the program for full or part-time is \$30 per day for the first child; each additional child is \$25 per day. **PAYMENT IS DUE THE FRIDAY BEFORE YOUR CHILD ATTENDS CAMP.** This is different than SEAS payments during the school year. Payment for the full week would be \$150 for one child, \$275 for two children, or \$400 for three children. **THERE IS NO CREDIT, you pay for the days you sign up for whether your child attends those days or not.**

Payments can be made at camp by check (payable to: St. Edmond), cash, or on line at the EZ School Apps (new families, you will need to open a parent account).

VACATION: If you are going on vacation you need to notify us as soon as you know the dates, no later than one week in advance. If not, you will be charged for the week you are on vacation.

If you have any questions please contact me. My email is <u>chizekv@st-edmond.com</u> or call 515-576-5182.

Gini Chizek SEAS Director St. Edmond Catholic School

Camp St. Ed's

Registration form - Program beginning May 28th and ending July 26th. Program closed July 1-5.



PLEASE PRINT ALL INFORMATION CLEARLY

Student's Name			Birthday	Male_	Female	_Grade
Student's Name			Birthday	Male_	Female	_Grade
Student's Name			Birthday	Male_	Female	_ Grade
Student's Name			Birthday	Male_	Female	_Grade
Address	City		State <u>IA</u>	Zip	Home Phone	e <u>(</u>)
Father's Name		_ Work Phone		Ext	Cell Phone	
Mother's Name		Work Phone		Ext	Cell Phone	
Parent's Email Address						
Doctor						
PLEASE LIST AN ADDITION	AL CARETAKER II	N CASE OF EME	RGENCY:			
Name				Phone		
PLEASE LIST ANY SPECIAL						
FLEASE LIST ANT SPECIAL	INFORMATION W	E NEED TO KNO	W ABOUT TO	OK CHILD		
PLEASE LIST THE NAMES (OF OTHER ADULT:	S AUTHORIZED	TO PICK YOUI	R CHILD UP:		
Name				Phone		
NamePhone						
		your child/child:				
		Monday Tuesday Wednesda Thursday Friday	у			
****Please not	ify summer cam	p staff any cha	nges affectin	ng daily atten	dance****	
Cost of the program f day. Payment is due t covers each day your	he Friday before o	r the Monday of	the week your	child attends		
**** INITIAL THE	TWO STATEMEN	ITS BELOW AF	TER READIN	<u>IG</u> : **** <u>DO N</u>	OT CHECK**	***
I give	permission to have	an ambulance ca	illed in the ever	nt of a medical e	emergency.	
My ch	nild/children are hea	Ithy and free from	disease.			
***I understand that appro	priate student beha	vior is expected a	nd I will be noti	fied of any disci	plinary actions.*	**
Parent Signature:				Date		

The after school program will have access to your child's emergency medical information. Parents will be notified if there is a need for doctor or dental care.