

SCHOOL DISTRICT #43 COMMUNITY SCHOOL'S

SUMMER DAY CAMPS
FOR 2012



Our Community School's are pleased to offer SIX - WEEK LONG Summer Day Camp Programs in July and into August. Camps will be held at the following Community Schools:

MILLER PARK
800 EGMONT AVENUE,
COQUITLAM, BC
604 230-1233
FAX 604 936-9992
AGES 6 – 12 YEARS

PITT RIVER
2070 TYNER STREET,
PORT COQUITLAM, BC
604 464-0207
FAX 604 941-2711
AGES 6 – 12 YEARS

Our Day Camp Leaders will plan daily/ weekly activities reflecting the following areas:

- Recreation and Games, Arts and Crafts, and Science Activities
- Field Games and outdoor Sports - weather permitting/Park Outings
- A Reading and Library program
- A Special Friday fun day each week
- Swimming at local pool (fees apply) form will be sent home each session/week
- A weekly big screen movie with popcorn and juice
- There may also be guest leaders with special activities or presentations

Weekly activity schedules are still to be worked out by the Camp Leaders and they will be available at the beginning of the first day of camp. Camp Hours are: 9 AM – 3PM. Drop off at 8:50am & Pick up by 3:05pm

•	Week / Camp 1	July 3 th – July 6 th	<u>Please Note:</u> Week # 1 and # 6 are Only 4 Days
•	Week / Camp 2	July 9 th – July 13 th	
•	Week / Camp 3	July 16 th – July 20 th	
•	Week / Camp 4	July 23 th – July 27 th	
•	Week / Camp 5	July 30 th – Aug 3 th	
•	Week / Camp 6	Aug 7 th – Aug 10 th	

To Register: Forms are available at each school or download from the following websites:

www.sd43.bc.ca/millerpark

www.sd43.bc.ca/pittriver

Please complete the following form (both sides please – pages 3 & 4) and return with payment in cash or a cheque(s) payable to either Miller Park or Pitt River Community Schools. For more information please contact:

Miller Park Camps: Steve Brown-John at 604 230-1233 or sbrown-john@sd43.bc.ca

Pitt River Camps: Heather Roemer at 604 464-0207 or hroemer@sd43.bc.ca

Before and After Camp Care:

May be available for each Community School Camp from the licensed providers listed below:

Miller Park: Miller Park Child Care Centre Contact Sue 604 936-0245 or mpchildcarecentre@shaw.ca

Pitt River: Karalot Daycare Contact Renata 604-941-3039

Camp drop off and pick up times are: 8:50 AM for drop off and by 3:05 PM for pick up. Children attending **Before and After Care** will be picked up by camp/daycare staff from, and returned to, these programs.

Children not picked up on time *may* be taken to the **Before and After Care** provider and a fee for service *will* be charged. **Summer Camp Leaders cannot work beyond their appointed hours.**

The cost per child for the Summer Day Camp Programs are as follows:

The full week programs are \$90 (Weeks 2, 3, 4 & 5). Week 1 and 6 (4 days) are \$75. The cost for Miller Park students is discounted reflecting the ongoing support of the PAC. Pitt River and Central Community Schools will receive a coupon discount. Please see the attached fee schedule.

> A single day or individual day(s) registrations, *if space is available*, will be \$20 per day.

Please Note: These programs fill very quickly and spaces are limited. Registration will be done on a *“first come - first paid basis”*. In order to reserve your child’s/children’s spot(s), all program fees will need to be paid in advance by **Friday, June 15th**. Post dated cheques, dated prior to the week you are registering for, are acceptable. Late Registrations, space permitting, will be accepted. Note: the school offices will be closed after Thursday June 28th. Registration and payment after that date must be done at the Camp.

Please make all cheques payable to Miller Park or Pitt River Community Schools

Cancellations after Monday June 25th will be subject to a \$20 per week Service Charge.

Dishonoured cheques will be subject to a \$35 charge. **Replacement** receipts \$5.

Financial assistance may be available. For more information contact:

Steve Brown-John 604 230-1233 sbrown-john@sd43.bc.ca or Heather Roemer 604 464-0207 hroemer@sd43.bc.ca

Where eligible - application for financial subsidies is the responsibility of the parent.

REALLY, REALLY IMPORTANT ADDITIONAL INFORMATION

Camp participants MUST bring the following items each day they are at camp:

- * *Lunch and snacks* * *Change of clothes*
- * *Sun Screen* * *Water Bottle labeled with your Child’s Name*
- * *Hat* * *A Smile*

Please ensure that your children do not bring money (unless requested) or personal items to camp. (*Please no Cell Phones, iPods, etc*). Community School’s will not be responsible for any lost or stolen items.

- **It is essential that we have a completed registration form for each child in the event of an emergency.** (Carecard Numbers, contact information, emergency contacts, additional medical information - page 3)
- **Please make sure that you state clearly which week(s) you are registering for on the Registration Form and please include payment (cash or cheque only).**

Parents, caregivers or legal guardians will be required to sign their child(ren) in and out each day. If your child(ren) is/are allowed to wait or walk home on their own we must have a written and dated consent (page 4). A child(ren) **will not be released** until the adult, who has Signed In their child(ren) that day, arrives to pick them up or contact has been made for an alternate arrangement. Ministry of Children and Families guidelines will be strictly followed for children who are not picked up.

For additional registration inquiries or for more information, please contact:

- **Steve Brown-John - Community Schools Coordinator for Miller Park and Seaview Community Schools at 604 230-1233 or sbrown-john@sd43.bc.ca OR**
- **Heather Roemer - Community Schools Coordinator for Pitt River and Central Community Schools at 604 464-0207 or hroemer@sd43.bc.ca**

SD #43 Community School Summer Camp Registration 2012
Please use a separate form for each child & PLEASE PRINT

Child's Name: _____ Age: _____ Birth date: _____

Care Card / Medical #: _____ School: _____

Parent / Guardian: _____ Home Phone: _____

Address: _____ Cell: _____

Email: _____ Work: _____

Emergency Contact: _____ Phone: _____

Doctor: _____ Phone: _____

Please list any allergies and/or medical concerns: _____

Please indicate which camp you are registering for:

> _____ **Miller Park in Coquitlam** OR > _____ **Pitt River in Port Coquitlam**

Non Community School Student Fee:

Community School Student Fee:

Camp 1: July 3 – July 6, 2012 \$75.00 \$ _____

\$70.00 _____

Camp 2: July 9 – July 13, 2012 \$90.00 \$ _____

\$80.00 _____

Camp 3: July 16 – July 20, 2012 \$90.00 \$ _____

\$80.00 _____

Camp 4: July 23 – July 27, 2012 \$90.00 \$ _____

\$80.00 _____

Camp 5: July 30 – Aug. 3, 2012 \$90.00 \$ _____

\$80.00 _____

Camp 6: Aug. 7 – Aug. 10, 2012 \$75.00 \$ _____

\$70.00 _____

TOTAL FEES: \$ _____

Method of Payment: Cash _____ OR Cheque # _____

Receipts will be issued upon request. Please Note: Replacement receipts will be subject to a \$5.00 charge.

➤ **Please complete the Waiver** - (please see over)

SD #43 Summer Camp Registration 2010

Permission / Waiver

Initial _____ My child has permission to attend functions associated with the Program (Specific details will be provided before the activity).

Initial _____ My child will be picked up by: _____

Or _____

Initial _____ My child will walk home.

Initial _____ I/We authorize School District #43 to use photographs taken Of our son/daughter while participating in Community School Programs, services, and events for Community School Brochures and promotional events.

- I/We agree that our son/daughter will follow all reasonable instructions and directions of the program instructor(s) in connection with the operation of the Community Schools of School District #43 Coquitlam.
- I/we release, remise and forever discharge School District #43, school district staff, program instructors and partner of the Community Schools of and from all manner of actions, claims and demands of whatever nature which results from any accidental injury, loss of expense sustained, arising out of or in any way connected with participation in any Community School program, service or event.
- In the event that our son/daughter is injured, ill, or in need of medical attention and I/We are unable to be contacted, I /We authorize School District Staff, program instructors and volunteers to seek medical attention on my/our behalf.
- I/We give permission for our son/daughter to participate in out trips to local community parks, facilities, events including public transportation if required.

Signature of Parent or Guardian: _____

Dated: _____ 2012

Thank You!