



## Summer Camp Application 2022

Dear A Godly Seed Early Learning Centers Summer Camp Applicant:

In an effort to better serve the needs of your camper and ensure that camp is a fun and enjoyable experience, please note the following:

The application should be completed and returned with all supporting documentation before your child's first day at camp.

We ask that you take a moment to look over the information requested before filling out the enclosed application. As the application is very thorough, please know that every blank must be filled in and/or signed by you, but if a question does not apply to your camper, please write N/A in the space. Any incomplete applications could be returned and delay the registration process.

We are looking forward to a great summer and hope to see you this camping season! Please feel free to contact us with any camp-related questions at 301-237-6439.

Sincerely,

Tanya Winters  
Camp Director  
twinters211@gmail.com

## A Godly Seed Early Learning Centers 2022 Summer Camp *Part 1*

### *Tuition and Deposit Information*

The full-time fee each one-week camp session is \$175. Part-time tuition (2 days or less) is \$70/per day. A one time \$100.00 registration fee reserves your camper's session and is due with the completed application. ***Reservations for a session will not be held without the deposit.***

As a courtesy and convenience to our working parents, we offer before and aftercare. The before and/or aftercare for children arriving before 9am and/or departing after 3pm is a flat fee of \$25 per week.

Sibling discount - First child full price, 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup>, child - \$10.00 off.

All camp reservations must be prepaid. Paid tuition for any week is due by the Friday proceeding that camp week.

*Please make checks payable to A Godly Seed Early Learning Centers and write your camper's name in the memo line of the check.*

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Name

Date

## A Godly Seed Early Learning Centers 2022 Summer Camp *Part 2*

### *Documents Checklist*

*(Please include the following documents and return this checklist along with application)*

- Completed Summer Camp Application (w/ \$100.00 Registration fee)
- Youth Camper Health History Form
- Copy of Immunization record
- Copy of medical insurance card & completed treatment consent form
- Current photo (taken within the last year) & photographic consent form
- Completed A Godly Seed Early Learning Centers Summer Camp Consent Forms
- Field Trips
- Consent for Medical Treatment
- Photographic Authorization
- Dismissal Policy
- Third Party Payments Policy (if applicable)

**A Godly Seed Early Learning Centers**  
**2022 Summer Camp *Part 3***

**Date of Application:** \_\_\_\_\_

The following are the dates for A Godly Seed Early Learning Centers Summer Camp 10 one-week sessions. Please note that the camp tuition for the first week is due prior to the first date of your child’s scheduled camp attendance.

Please indicate your session choices:

Week 1	June 27th – July 1 <sup>st</sup> - <i>tuition must be paid no later than <b>Friday, June 24<sup>th</sup></b></i>	circle one  yes / no
Week 2	July 4 <sup>th</sup> – July 8 <sup>th</sup> - <i>tuition must be paid no later than <b>Friday, July 1<sup>st</sup> (closed 7/4)</b></i>	circle one  yes / no
Week 3	July 11 <sup>th</sup> – July 15 <sup>th</sup> - <i>tuition must be paid no later than <b>Friday, July 8<sup>th</sup></b></i>	circle one  yes / no
Week 4	July 18th – July 22 <sup>nd</sup> - <i>tuition must be paid no later than <b>Friday, July 15<sup>th</sup></b></i>	circle one  yes / no
Week 5	July 25th – July 29 <sup>th</sup> - <i>tuition must be paid no later than <b>Friday, July 22<sup>nd</sup></b></i>	circle one  yes / no
Week 6	Aug 1 <sup>st</sup> – Aug 5 <sup>th</sup> - <i>tuition must be paid no later than <b>Friday, July 29<sup>th</sup></b></i>	circle one  yes / no
Week 7	Aug 8 <sup>th</sup> – Aug 12 <sup>th</sup> - <i>tuition must be paid no later than <b>Friday, Aug 5<sup>th</sup></b></i>	circle one  yes / no
Week 8	Aug 15 <sup>th</sup> – Aug 19 <sup>th</sup> - <i>tuition must be paid no later than <b>Friday, Aug 12<sup>th</sup></b></i>	circle one  yes / no
Week 9	Aug 22 <sup>nd</sup> – Aug 26 <sup>th</sup> - <i>tuition must be paid no later than <b>Friday, Aug 19<sup>th</sup></b></i>	circle one  yes / no
Week 10	Aug 28 <sup>th</sup> – Sept 2 <sup>nd</sup> - <i>tuition must be paid no later than <b>Friday, Aug 26<sup>th</sup></b></i>	circle one  yes / no

**A Godly Seed Early Learning Centers**  
**2022 Summer Camp *Part 4***

Field Trips incur individual fees.

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Name

Date

**A Godly Seed Early Learning Centers**  
**2022 Summer Camp *Part 5***

***Applicant Information***

If you have more than one child, a separate application must be completed for each child.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Date of Birth: Current Age: \_\_\_\_\_

Name of school \_\_\_\_\_ Last Grade Completed \_\_\_\_\_

Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ T-Shirt size: \_\_\_\_\_

Primary language: \_\_\_\_\_ Secondary Language \_\_\_\_\_

Briefly describe any physical disabilities or limitations that the applicant may have:

\_\_\_\_\_  
\_\_\_\_\_

***Parent/Guardian Contact Information***

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

Business Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

Home Address (include city, state and zip code) \_\_\_\_\_

\_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

**A Godly Seed Early Learning Centers**  
**2022 Summer Camp *Part 6***

***Emergency Contact Information***

(We will always contact parents/guardians first, so please provide names and numbers of other people whom we may contact in the event of an emergency, i.e. grandparents, aunts, uncles, close neighbors)

Admission Applicant's Name \_\_\_\_\_  
**Primary Contact:** \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

**Secondary Contact:** \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Business Phone: \_\_\_\_\_  
Relationship to Applicant: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

**Third Contact:** \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Business Phone: \_\_\_\_\_  
Relationship to Applicant: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

**A Godly Seed Early Learning Centers**  
**2022 Summer Camp *Part 7***

***Who is authorized to pick up your child(ren) from camp?***

**Primary Contact:** \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Business Phone: \_\_\_\_\_  
Relationship to Applicant: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**Secondary Contact:** \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Business Phone: \_\_\_\_\_  
Relationship to Applicant: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**Other Contact:** \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Business Phone: \_\_\_\_\_  
Relationship to Applicant: \_\_\_\_\_  
Email Address: \_\_\_\_\_

*Note: For your child's safety, he/she will not be released to anyone whose name is not in our files as an authorized pick up person. Attach extra sheet of paper with information for additional authorized pick up individuals if needed.*

## A Godly Seed Early Learning Centers 2022 Summer Camp *Part 8*

### *Photographic Authorization*

Camper's Name \_\_\_\_\_

A Godly Seed Early Learning Centers maintains a photographic history including videos of on and off campus activities in which residents and campers participate. Some activities or events may be published in various types of appropriate and professional presentations. On occasions, photographs may be necessary for medical purposes. A Godly Seed use of the photographic materials will not be used to exploit and is protective of the residents' and campers' rights and dignity.

I/We understand the above and agree with the use of photographs for the stated purposes.

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

\_\_\_\_\_  
Date

## A Godly Seed Early Learning Centers 2022 Summer Camp *Part 9*

### *Dismissal Policy*

In an effort to ensure your child has a safe, fun and enjoyable experience, please review the Dismissal Policy. By reviewing and signing the Dismissal Policy form, you acknowledge your understanding of this policy.

It is the A Godly Seed Early Learning Centers policy to dismiss a camper in the following circumstances:

- Upon direct orders of a physician
- When camp administration determines that the camper needs services and supervision beyond those provided by our camp and our staff
- When the camper exhibits any of the following behaviors or conditions:
  - Refusal of prescribed medications
  - Inappropriate sexual behavior
  - Aggressive or
  - threatening behaviors

- Destruction of property Inability to complete self-care tasks (bathing, toileting, feeding, etc.)
- Aggressive or threatening behaviors
- Non-compliant behavior
- Throwing objects
- Biting, scratching, kicking, fighting Incontinence of bowel and bladder

**A Godly Seed Early Learning Centers**  
**2022 Summer Camp *Part 10***

***Consent to Treat***

I hereby authorize physicians, nurses, hospitals, and their authorized personnel, whether employed, contracted, or paid on a fee basis by the A Godly Seed Early Learning Centers, to perform treatments and procedures as deemed necessary; and, release all medical or hospital records to A Godly Seed Early Learning Centers from existing hospital and medical records; and, release all medical and hospital records possessed by A Godly Seed Early Learning Centers to other physicians, nurses, hospitals and their authorized personnel. All releases and authorizations are for performance of treatment, procedures and medications as deemed necessary for my applicant.

\_\_\_\_\_

Parent / Guardian Signature

\_\_\_\_\_

Date

**A Godly Seed Early Learning Centers**  
**2022 Summer Camp *Part 11***

***Parent Consent Form Field Trip***

I, \_\_\_\_\_ hereby give permission for  
 (Name of parent or guardian)

\_\_\_\_\_ to participate in the field trips that have been planned by A Godly Seed Early Learning Centers 2022 Summer Camp Program. I give the A Godly Seed staff permission to transport my child by the facility van or chartered transportation to the following field trips included but are not limited:

My signature below affirms my understanding that participation in field trips and related activities may present some risk of injury. Therefore, I consent to emergency treatment for my child, if necessary. I further understand that A Godly Seed Early Learning Centers or their staff and volunteers assume no liability for injuries or damages sustained by my child as a result of participating in any field trips or related activities planned and implemented by the staff of A Godly Seed Early Learning Centers.

A separate consent form must be completed for each child being registered.

\_\_\_\_\_

Parent / Guardian Signature

\_\_\_\_\_

Date

**YOUTH CAMP HEALTH HISTORY**  
**CAMPER**

Child's Name: \_\_\_\_\_

Current residence: \_\_\_\_\_

\_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

Emergency Contact  
(Parent or Legal Guardian): \_\_\_\_\_ Phone: \_\_\_\_\_

2<sup>nd</sup> Emergency Contact  
(Other than Parent Above): \_\_\_\_\_ Phone: \_\_\_\_\_

Primary Care Physician or  
other provider of medical care: \_\_\_\_\_ Phone: \_\_\_\_\_

**HEALTH INFORMATION:**

Are there any health problems including physical, psychiatric, or behavioral problems of which we need to be aware?  YES  NO

YES, Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are there any medications, dietary restrictions, allergies, or special needs that we need to be aware of to ensure that your child's camp experience is positive?  YES  NO

YES, Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IMMUNIZATION INFORMATION:**  
**Must list current residence above.**

For campers who currently reside within the United States, a United States territory, or the District of Columbia: Does the camper have any immunization exemptions because of a parental or guardian objection or medical contraindication?  YES  NO

YES, List: \_\_\_\_\_

For campers who reside **outside** the United States, a United States territory, or the District of Columbia: Attach record of vaccination or immunity on Department form MDH-896.

\_\_\_\_\_  
Parent or Legal Guardian's Signature Date

MDH-4768 (12/2017)



A Godly Seed Early Learning Centers  
2022 Summer Camp *Part 13*

*Affirmation of Completeness and Accuracy of Application*

I/We, \_\_\_\_\_,  
hereby affirm that the information provided within the completed application is complete and accurate to the best of my/our knowledge. We give consent for our applicant \_\_\_\_\_ to attend the A Godly Seed Early Learning Centers 2022 Summer Camp and to participate in all programs and activities of the A Godly Seed Early Learning Centers program. I have read and understand all policies of A Godly Seed Early Learning Centers. I further understand that A Godly Seed Early Learning Centers is not responsible for lost, misplaced, or damaged personal items.

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

\_\_\_\_\_  
Date