

ST. JOHN'S SUMMER DAY CAMP 2023: *To the Ends of the Earth!*
For children entering 1st - 8th Grades in the 2023-2024 school year

Emergency Cell During Camp Hours: 720.215.0193

June 5 – August 4, 2023

M-F 7:30am-5:30pm

We love kids and we love summer camp! We are a Colorado state licensed facility that offers a safe, fun, and Christian summer day camp program. Our staff endeavors to live out St. John's mission of "connecting people with Jesus."

Registration Fee: \$50 (one time fee per camper—includes camp T-shirt)

Weekly Rate: \$300 (attending 4-5 days per wk)

3 Days a week: \$250

Field Trip/Transportation Fee: \$35 (if child is attending on a field trip day)

Blackbaud (formerly Smart Tuition) Fee: \$35 per family

Change of Schedule Fee: first change, no charge, after that \$50 per occurrence

4 week notice required for any refunds

All summer camp costs are billed through the 3rd party company of Blackbaud (formerly Smart Tuition).

If your child was enrolled at St. John's School for the 2022-2023 school year, you have already paid this Blackbaud fee.

Field Trips! We will have field trips during 6 weeks of the summer. They will either be field trip experiences on site at St. John's or places we will travel by charter bus. If your child is signed up to attend on a field trip day, there is an additional \$35 fee. You are not able to opt out of the field trip. Please see the days for field trips on the following page.

DEADLINE **Camp registrations are due April 1.** For younger grades, space may run out prior to this date. If space is available, we will accept registrations after this time.

ENROLLMENT: There are 2 options for enrollment, either the full week, or 3 days a week. You may choose whichever 3 days of the week work best for you, and whichever weeks work best. (Enrolling for 1-2 days per week is not an option.) A 4 week notice is required for refunds.

KIDCHECK All campers must be registered in the KidCheck system prior to their first day of camp. One parent/guardian must be the account creator and listed as the primary guardian. S/he must add the other parent and guardians who will check-in and check-out the children. Parents/guardians **should not create separate accounts**; this causes children to be checked in and out incorrectly and compromises safety. Go to <https://go.kidcheck.com> to create a free account.

IMMUNIZATION FORMS For school age children, a copy of a physical is not required. A copy of the child's immunization form is required by May 1.

MEDICAL CONCERNS If your child has asthma, severe allergies, or other medical needs, a health plan form signed by both the physician and a parent must be turned in directly to the director or an assistant director and reviewed with him/her at that time. It cannot be dropped off without review. Health forms are available at <https://sidenverschool.org>, then click on summer camp. This must be turned in by May 1.

DIRECTIONS FOR SUMMER CAMP REGISTRATION TO BE ACCEPTED:

- If your child is enrolled at St. John's School for the 2023-2024 school year: Print off and return the completed and signed financial agreement document. *Your child's emergency info and waiver will be pulled from their registration; you do not need to fill it out again.* It may be e-mailed or snail mailed.
- Your child is enrolled at another school (not St. John's) for the 2023-2024 school year: Print off and return the following: the child emergency contact form, waivers, and financial agreement by email or postal mail.
- A separate registration is required for each child. **We cannot accept photos of documents.**

Please email completed forms to gloria.roggow@sidenver.org.

To mail, send to St. John's Summer Camp, 700 S Franklin St, Denver, CO, 80209.

www.sidenverschool.org, 303.733.3777 x156, fax 303.778.6070

What to Bring Every Day

- **Sunscreen** Please put sunscreen on your child prior to dropoff. **We will also provide 30 spf sunscreen to be applied twice a day.** Please help us protect your child's skin by avoiding tops/shirts which expose the shoulders and back.
- **Lunch** every day. No microwave or refrigerator is available.
- **Water bottle** labeled with name every day. Let's go green!
- **Personal items** such as electronics and a toy may be brought on Fridays only.
- **Label everything from towels to lunchboxes.**

AFTERNOON SNACK will be served every afternoon. Breakfast is not provided. For the 7:30am dropoff, children may bring breakfast with them if they wish.

CELL PHONE POLICY Campers are asked to keep their cell phones in their backpacks or at home. 5th-8th campers are allowed to use them with permission at various times. We do not allow campers to use social media, email, or text on phones or watches during summer camp. With permission, they may text or call guardians.

STAFF: All of our full time staff members are at least 18 years of age and have experience with school age children. All staff have a background check. Many have previously worked at St. John's summer camp or before/after school care.

RATIO: The required ratio is 1 staff member per 15 children. Our ratio is usually 1:10. For swimming and off site field trips, our ratio is 1:7 or lower.

GROUPS: Campers are divided into the following groups for the main activities of the day: entering 1st grade, entering 2nd Grade, and entering 3rd/4th Grades, entering 5th-8th grades.

WEEKLY FIELD TRIPS on site at St. John's OR by chartered bus

- 1st & 2nd Grade will have bus field trips primarily on Tuesdays,
- 3rd-8th Grade will have bus field trips primarily on Thursdays.

Our field trips are a combination of on site experiences that we bring to St. John's OR places we go by chartered bus.
We hope to have the location and event schedule for field trips finalized by April 1.

Campers must wear their camp shirt on all off-site field trips.

Field Trip Days for campers entering 1st & 2nd grades—mostly Tuesdays

June field trips:

Tues, June 13 Butterfly Pavilion

THURS, June 22 Big Sky Bounce on site at St. John's

Tues, June 27 TBD

(No field trip during 4th of July week. We are closed Monday, July 3 and Tuesday, July 4)

Tues, July 11 Splash Aquatic Park

Tues, July 18 Kid's Wonder (waiver required)

Tues, July 25

Crawdad fishing at Wash Park the last week of camp! (no field trip)

Field Trip Days for campers entering 3rd – 8th grades—mostly Thursdays

June field trips

Thurs, June 15 TBD

Thurs, June 22 Big Sky Bounce on site at St. John's

Thurs, June 29 TBD

(No field trip during 4th of July week. We are closed Monday, July 3 and Tuesday, July 4)

Thurs, July 13 TBD

WED, July 19 Rockies' Game

Thurs, July 27 TBD

Crawdad fishing at Wash Park the last week of camp! (no field trip)

SUMMER CAMP 2023 *To the Ends of the Earth!*

TO THE ENDS OF THE EARTH! This next summer we will go “To the Ends of the Earth” and talk about how Jesus came for all people. We’ll get to visit Peru, India, and Australia just to name a few places!

DRESS UP/COSTUME DAYS will be on most Wednesdays throughout the summer. Stay tuned!

Bonnie Brae Ice Cream Schedule (cost included in the program)

Each grade group will go to Bonnie Brae Ice Cream most weeks. Schedule in progress.

Wash Park Rec Center Swimming (cost included in the program)

We hope to return to the Wash Park Rec Center to swim if their staffing allows. If so, here’s the scoop:

- If the Wash Park pool is able to be open this summer, each group will go once a week.
- Campers entering 1st grade must be in the shallow end of the pool only.
- For 2nd grade and up, they may swim elsewhere dependent upon their skill level.
- For 3rd grade and up who wish to swim in the deep end, the Rec Center requires that they must pass a swim test.
- Staff will be in the pool with campers.

General Schedule for all Campers

<u>Mornings</u>	<u>Afternoons</u>
<p>7:30 am Outside dropoff and sunscreen 7:30 – 8:15 Free play in classroom 8:30 am Outside dropoff and sunscreen 8:40 – 9:30 Group time and outside/gym free play 9:30 – 11:30 Rotate through various activities, depending on the day</p> <p>*STEAM activities *Bible time *Drama games *Social-emotional activities *Board/trivia games *Organized games *Glow Games</p>	<p>11:30 – 12:15 Lunch at Wash Park or St. John’s 12:15 – 1:00 Free play outside at St. John’s/Wash Park 1:00 – 3:00 Rotate through various activities, depending on the day</p> <p>*Swimming at Wash Park Rec Center *Service Projects *Movie of the Week *Bonnie Brae Ice Cream *Water relays and games *Classroom free play *Storytime/Reading *Optional crafts</p>
<u>End of Day</u>	<u>Field Trip Day</u>
<p>2:30 – 3:30 Snack 3:30 First outside pickup 3:30 – 4:15 Clean/organize classroom Organized activities or free play 4:30 Second outside pickup 4:30 – 5:15 Outside/gym free play 5:30 Last pickup</p>	<p>7:30 Outside dropoff 7:30-8:15 Free play in classroom 8:30 Outside dropoff and sunscreen 9:00 – 9:30 Group time and gym/outside free play 9:30 – 2:30 Field trip on site at St. John’s or off site For off site field trips– Leave: between 8:45 and 9:45 Return: between 2:30 and 3:00 Weekly times posted. 3:00- 5:30 Follow end of day schedule</p>

CHILD EMERGENCY CONTACT and HEALTH INFORMATION FORM

(Per state requirements, form must be filled out completely for registration to be accepted.)

Child's Full Name: _____ DOB: _____ AGE: _____

Primary Address: _____ City: _____ Zip: _____

Address 2 (if applicable): _____

Primary Care Physician: _____

Dentist: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Hospital of Choice: _____

Hospital Phone: _____

Address: _____

(Contact this parent first)

(Contact this parent second)

Parent Name: _____

Parent Name: _____

Work Phone: _____ Cell Phone: _____

Work Phone: _____ Cell Phone: _____

Employer: _____

Employer: _____

Address: _____

Address: _____

Email: _____

Email: _____

Additional persons approved for pickup and emergencies. List in order of contact preference:

1. Name: _____

2. Name: _____

Address: _____

Address: _____

Phone #: _____

Phone #: _____

3. Name: _____

4. Name: _____

Address: _____

Address: _____

Phone #: _____

Phone #: _____

Are there any custody agreements, restraining orders, or any other information of which we should be aware? If so, please describe: _____

If your child has asthma, severe allergies, or needs medication administered, a separate health plan form must be filled out. This may be obtained from the Director or downloaded at www.sjdenver.org/school.

Allergies: Yes _____ No _____ Asthma: Yes _____ No _____ Special Diet: Yes _____ No _____

Medications: Yes _____ No _____ History of Seizures: Yes _____ No _____

Vision Impairment: Yes _____ No _____ Hearing Impairment: Yes _____ No _____

Use of Special Adaptive Equipment: Yes _____ No _____

If answered yes above, please explain below. Also include any other important conditions of which attending medical personnel should be aware (i.e. heart, respiratory, drug reactions, etc): _____

St. John's Lutheran Church and School Summer Day Camp Child Waiver/Indemnity Agreement

The Summer Day Camp program (or the "Program") is a ministry of St. John's Lutheran Church and School (SJLC).

The Summer Day Camp is authorized to enter into this agreement as an agent of SJLC.

I hereby permit the Summer Day Camp and/or its agents to take my child, _____, to functions, lunches, sports outings, and other field trips beyond the church grounds. I understand that I WILL BE GIVEN PRIOR NOTIFICATION of such trips, and that St. John's contracts out transportation services to a private bus charter company, uses public transportation (i.e. RTD or light rail services,) or uses Summer Camp Staff/Parents to transport to and from activities. I release the Program from any and all liability in the event my child is involved in an accident associated with the Program and its agents.

_____ **Initial (required for admittance)**

In the acceptance of my child as a participant in the Program, and having satisfied myself that supervision and attention to safety are prudent and reasonable, I agree to indemnify, defend and hold harmless, the Program and its agents, employees, and representatives against any and all claims and demands (including legal fees) made by me, my spouse, or legal guardian of the child.

_____ **Initial (required for admittance)**

If my child has a clinical, chronic health condition, it is my responsibility to submit a Health Care Plan (forms available in the ELC office), which stipulates special needs. NOTICE: Initial and continued enrollment in the Program is subject to approval of an appropriate Health Care Plan when medically necessary, as determined in the sole discretion of the Program. The administration of the Program, in consultation with the nurse consultant and/or other medical personnel, shall make a determination as to the suitability and effectiveness of any Health Care Plan and shall reserve the right to disenroll any child from the Program at any time. Notification of enrollment acceptance may be given prior to receipt of acceptance of any Health Care Plan for purposed of placement and enrollment count. However, no enrollment shall be guaranteed until any necessary Health Care Plan is approved.

_____ **Initial (required for admittance)**

In case of illness or accident, I give the Program permission to provide any emergency care for my child deemed necessary; including, but without limitation: treatment by public or private facilities or personnel. It is understood that a conscientious effort will be made to locate me (or the emergency contact persons designated by me) before any action is taken. I accept and agree to pay any charges incurred by the Program for such care.

_____ **Initial (required for admittance)**

I recognize that it may become necessary for the Program to communicate with my child's doctor. I understand that the Program is under no obligation to contact my child's doctor, but should the Program decide to do so, I hereby permit the Program to receive information necessary from the child's doctor to provide the best possible care. I further understand it will be necessary for the Program to communicate about my child's health directly to my child's teachers, in which case I will permit the Program to use its discretion in communication about my child's health to his/her teachers.

_____ **Initial**

I hereby permit the Program to allow my child to view television and movies within reasonable limits as deemed beneficial by the Program. Viewing will be done in accordance with the curriculum, mission, and purpose, and with a specific learning purpose and/or for recreation. I understand that movies shown to my child will be rated "G" (1st-2nd grades) or "G" and "PG" (3rd-8th grades).

_____ **Initial**

I hereby permit the Program to apply sunscreen to my child as deemed necessary by staff. I agree that any brand of sunscreen is acceptable to me. If I prefer a specific type of sun protection, I will supply it to the Program.

_____ **Initial**

I hereby permit the Program to use pictures taken at the Program, in which my child may appear, for purposes of public relations (i.e. newspaper articles, films, slide presentations, pamphlets, etc.).

_____ **Initial**

I/we acknowledge that I am/we are the person(s) financially responsible for the above child and that I/we have read and understand the policies. I/we understand and acknowledge that the Program may deny admission and/or terminate enrollment at any time as outlined in the financial agreement.

_____ **Initial**

Parent/Guardian Signature: _____ **Date:** _____