

2026 MIDDLE SCHOOL BOOT CAMP

For select 6th Grade Students(Summer 2026)

Date: August 10 - 14 (five days) | **Time:** 9:00am - 11:30am

Place: Orefield & Springhouse MS | **Cost:** \$90.00

Check can be made payable to “Parkland School District” and mailed with registration.

Parkland School District is pleased to offer **Middle School Boot Camp**, a transition camp for select Parkland students going to 6th grade or who are new to the district. The camp will provide engaging activities to make summer learning both fun and meaningful. The emphasis will be on preparing students to be successful at middle level education. Strategies, tips, information, and advice will be shared and practiced in the areas of study skills, organization, time management, and public speaking, among others.

IMPORTANT INFORMATION

- **This camp seeks to:** offer a supportive environment in which students become acclimated to middle level education, develop students' repertoire of study skills and learning methods, instill acceptance for one's own learning in students & build confidence, provide opportunities for reflecting on learning preferences & setting goals.
- Students will receive no grade or course credit for the camp.
- Transportation will **not** be provided; all campers are responsible for their own transportation to and from the camp.
- Registration form and payment must be received by June 26, 2026.
 - Parkland School District
Education & Operations Building
ATTN: Laura Farkas
2619 Stadium Drive
Orefield, PA 18069

If you have any questions or need more information, please contact Mr. Jim Moniz at 610-351-5548. If you are interested in sending your child to this camp, please complete the registration form completely.

2026 MIDDLE SCHOOL BOOT CAMP

REGISTRATION & PERSONAL/HEALTH DATA FORM
AUGUST 10-14, 2026
PLEASE PRINT CLEARLY

REGISTRATION

****For Parkland Students who were enrolled in 5th grade for the 25/26 School Year, or are new to the district. No exceptions.****

STUDENT'S FULL NAME _____

GRADE (completed in 25/26SY) _____ SCHOOL _____

Please indicate which MS your child will be attending: Orefield MS Springhouse MS

PARENT/GUARDIAN INFORMATION

PARENT/GUARDIAN NAME _____

ADDRESS _____

EMAIL ADDRESS _____

PHONE # _____ CONTACT # DURING CAMP _____

MEDICAL/HEALTH

LIST ANY SPECIFIC MEDICAL CONDITIONS YOUR CHILD HAS _____

LIST ANY FOOD AND/OR MEDICAL ALLERGIES YOUR CHILD HAS _____

IN THE EVENT OF ILLNESS OR AN EMERGENCY, PLEASE LIST THE PERSON YOU WOULD LIKE CONTACTED FIRST AND THEN AN ALTERNATIVE CONTACT PERSON.

Please be sure to PRINT full names and telephone numbers.

EMERGENCY CONTACT #1

NAME _____ PHONE # _____

EMERGENCY CONTACT #2 (ALTERNATIVE)

NAME _____ PHONE # _____

PARENT/GUARDIAN SIGNATURE _____

Upon completion of registration & personal/health data form, please mail form and check in the amount of \$90, payable to "Parkland School District," to the follow address:
Parkland School District, ATTN: Laura Farkas, 2619 Stadium Drive, Orefield, PA 18069