Children’s Summer Day Camp 2012

EARLY REGISTRATION
Begins Monday, April 30, 2012
No applications will be accepted prior to this date.

CAMP FEES
In order to receive the following rates, all fees must be paid in full at the time of registration:

- Session I Deadline May 24, 4:30 P.M. $200
- Session II Deadline June 7, 4:30 P.M. $200
- Session III Deadline June 21, 4:30 P.M. $200
- Session IV Deadline July 12, 4:30 P.M. $200

A $25 late fee will be assessed for each camper registering after the deadline. Requests for refunds must be received in writing prior to the start of each session. Pro-rata refunds will be given up to the third day of camp, minus a $25 non-refundable registration fee. No refunds after the third full day of camp. Weekly rates are not available due to staffing requirements. Enrollment is not secured until payment in full has been received. No exceptions!

CAMP CANCELLATION/DISMISSAL
The University reserves the right to cancel Summer Day Camp if enrollment is not sufficient to cover the cost of the camp operation. If camp should be cancelled, all registration fees will be refunded in their entirety.

The administration of the Day Camp reserves the right to dismiss a camper for just cause (such as chronic misbehavior, inability to adjust to others, failure to adhere to camp policy, etc.) No refund will be made if a camper is dismissed.

PAYMENT METHODS
Make checks payable to Southeastern Louisiana University Day Camp and mail to:

Extended Studies
Southeastern Louisiana University 10858
Hammond, LA 70402
or bring to the University Center, Room 103.
Visa, Master Card, & Discover are also accepted.

For More Information:
Call 985.549.2301 or 1-800.256.2771
southeastern.edu/escamps
extended.studies@selu.edu

CAMP PHILOSOPHY
The philosophy of the Southeastern Louisiana University Summer Day Camp is to provide a variety of sport skills, physical fitness, and recreational games for boys and girls in Pre-K-6th grade for school year 2012-13*. Counselors are graduate and undergraduate students, recruited from Southeastern Louisiana University and are well versed in sport skills, recreational games, and are sensitive to the growth and developmental needs of children. The camp is designed for children to achieve higher levels of physical fitness and sport skills while having fun and developing a higher level of self-esteem.

*Must be 5 years old by December 2012.

SKILL & FITNESS ACTIVITIES
Various racket, team, and individual sports at a developmentally appropriate introductory level. Recreational water play will also be offered.

Please Note: This is not a sports camp.

SUPPLIES & FOOD
Each day, all campers are to bring a bag lunch with a drink. They should also bring a swim suit, swim shoes, and towel. Campers must wear tennis shoes daily and comfortable clothing. A light snack will be served during the day. Cost of this snack is included in your fee. NOTE: It is requested that children not bring toys, money, electronics, or valuable items to camp. We are not responsible if these items are brought to camp and they are lost or stolen.

CAMP HOURS
Mon–Fri, 9:00 A.M.–3:30 P.M.
With our extended day care program, campers can be dropped off as early as 7:30 A.M. and picked up as late as 5:00 P.M. For your child’s safety, a counselor must be present. Do not leave your child unattended at the drop-off site. Drop-off and pick-up point is the TEC Building. A picture ID is required. Camp activities will be held between 9:00 A.M. and 3:30 P.M. but not during extended day care time. There will be a late care fee of $5.00 for every one (1) to fifteen (15) minute increments after 5:00 P.M., payable at the time of pick-up.

CAMP DATES
Four two-week sessions, Monday-Friday

- Session I: May 29–Jun 8 (2 weeks) Holiday on May 28, No Camp
- Session II: June 11–22 (2 weeks)
- Session III: Jun 25–Jul 13 (2 weeks) (Holiday Jul 2-6, No Camp)
- Session IV: Jul 16–27 (2 weeks)

Register by Fax: 985.549.5078
Register online: www.selu.edu/es
Registration Form

CHECK SESSION(S):
☐ Session I (May 29–Jun 8, Holiday on May 28)
☐ Session II (Jun 11–22)
☐ Session III (Jun 25–Jul 13, Holiday Jul 2–6)
☐ Session IV (Jul 16–29)

PLEASE PRINT ALL INFORMATION:

Name of Child _______________________________ Age ____________ M □ F □
Street Address _______________________________ City_______________ State _____ Zip ____________
Mother or Guardian ___________________________ Email __________________________
Home Phone ___________________________ Work Phone ___________________________ Cell Phone ____________
Father or Guardian ___________________________ Email __________________________
Home Phone ___________________________ Work Phone ___________________________ Cell Phone ____________

Name and relationship of relative or neighbor who can be reached in case of emergency if parents cannot be reached.

Name _______________________________ Relationship ____________ Phone ____________
Name _______________________________ Relationship ____________ Phone ____________

Name and relationship of person to whom Southeastern Louisiana University is authorized to release child (if other than above). A photo ID must be presented in order to pick up a camper.

Name _______________________________ Relationship ____________ Phone ____________

My child has permission to go on field trips in conjunction with Southeastern Louisiana University’s Day Camp.

Parent/Guardian’s Signature ____________________________

PLEASE READ CAREFULLY & SIGN

In consideration of my child participating in the Southeastern Louisiana University’s Summer Day Camp, I, ______________________________ on behalf of myself, my heirs, legatees, personal representatives, and all those claiming by or through me consent to, and so hereby discharge and release forever hold harmless Southeastern Louisiana University and their affiliates, sponsors, agents, servants, employees, assigns, successors, and heirs and any facility at which events are held, from any and all claims, actions, losses, damages, or expenses for personal or bodily injury (including death) and property loss or damage of whatever nature or cause, incurred by me (or my child) arising out of or in any conjunction with my (or my child’s) participation in the aforementioned competition. I hereby consent I am of legal age and capacity and have read and understand the contents of the Consent and Release. Signature of parent or guardian required above.

Emergency Hospital Permission: I hereby give my permission to any adult at Southeastern Louisiana University Summer Day Camp to drive my child to the emergency room of North Oaks Medical Center in the event of a medical emergency. If this is not acceptable to you, give name of hospital where you wish your child to be taken:

Hospital: _______________________________ Pediatrician’s Name ___________________________ Phone ____________

List all allergies or special medical information ____________________________

NOTE: Please do not bring your child to camp if he/she is ill. Children who have fever or are taking medication should remain at home. No medication can be administered by the staff.

ADVISORY TO PARENTS/GUARDIANS: You are hereby advised by the Division of Extended Studies of Southeastern Louisiana University that, before allowing your child to participate in the program of vigorous physical activities involved in the Summer Day Camp, your child should have a medical examination by a qualified medical doctor for the purpose of establishing the child’s complete physical soundness for participating in the Day Camp activities.

WAIVER: I hereby waive any responsibility or negligence on the part of Southeastern Louisiana University for obtaining a medical examination for my child or having adequate medical insurance. The University supplies accidental insurance for each camper only as a supplement to the camper’s primary insurance. (Please print)

Child’s Name: _______________________________ Parent/Guardian’s Signature: ____________________________
Pictures will be taken of our various summer camps. I give Southeastern permission to include my child in these pictures. Y □ N □

Parent/Guardian’s Signature ____________________________ Date ____________