

WINTER BREAK CAMP 2017

All Parishioner students are invited to spend winter break with the Parish School Extended Day staff. Each day of camp, the children will make special gifts/crafts to share with friends and family, or to keep for themselves. In addition to craft time, the campers will play energy burning games and enjoy winter and Christmas-themed movies.

When: December 21-22, 26-29, and Jan. 2 **Time:** 7:30am-6:00pm **Where:** Parish School Building

The Camp is for 3yr olds (by 9/1/17 and fully potty trained) to 8th grade

Rates and Deadlines

Full Camp (7 days): \$175 first child; \$105 for each additional sibling

Daily Rate: If not attending all 7 days - \$30 first child; \$20 for each additional child

Deadlines: **Register with payment by November 1st and save 20% if attending all 7 days.** The final deadline for registration and payment is November 15th

Refund Policy: Camp payments are non-refundable **unless** we do not have a total of 40 students registered by November 15th.

A Typical Day

7:30-9:15:	Drop off and indoor free time
9:15-9:30:	Morning snack (snack provided but your child may bring his/her own)
9:30-10:00:	Reading time (bring a book from home)
10:00-10:45:	Outdoor group games
10:45-11:30:	Craft time
11:30-12:00:	Lunch (please pack a lunch each day)
12:00-1:30	Movie and rest time
1:30-2:45:	Outside group games/free play
2:45-3:00:	Afternoon snack (snack provided but your child may bring his/her own)
3:00-4:30:	Outside free play (pick up)
4:30-5:00:	Indoor games and activities (pick up)
5:00-6:00:	Indoor free play (pick up)



Camp Registration

Please complete ALL fields and return no later than November 15th. Registration and payment are to be returned to Blessed Sacrament School - Attn: Mr. Harley Cantrell. Checks are to be written to Blessed Sacrament School, in memo line write "Winter Camp". If mailed, the address is 7 St. Teresa Dr. 29407

Student's name _____

Grade _____

Parent's name _____

Contact # _____

Parent's name _____

Contact # _____

The following people ARE permitted to pick my child(ren) up from camp.

Name	Relationship	Contact #
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list all allergies and reactions.

Additional comments/information.

Intended Attendance

*****This section MUST be completed or the registration will be returned*****

_____ My child(ren) will attend all 7 days of camp.

_____ My child(ren) will be dropping in on:

_____ Thursday 12/21 _____ Friday 12/22

_____ Tuesday 12/26 _____ Wednesday 12/27 _____ Thursday 12/28 _____ Friday 12/29

_____ Tuesday 1/2