

Canal Lake Christian Day Camp

ABOUT CANAL LAKE CHRISTIAN DAY CAMP

Canal Lake CDC is an extension of the House of Prayer Church ministry. Our goal is to help children experience a living, loving relationship with Jesus Christ and His world. We will have opportunities for our campers to experience the beauty of God's creation in a fun and educational format. Our Mission Statement is the same as the one for Canal Lake Bible Camp. *(The mission of Canal Lake Bible Camp is to reach people for Christ and develop Christ-centered character in an inviting, challenging, and fun environment.)*

CAMPERS

Canal Lake CDC is open to children ages 5-11 (K-5th grade). *This will be for those starting kindergarten this fall up through those starting 5th grade this fall.* Canal Lake CDC will be limited to sixty campers per week. Campers will be divided into three (3) groups of twenty (20) each week according to their ages and or grades.

STAFF

Canal Lake CDC will have one adult and one teen per group of twenty campers plus other staff as needed per activity. The CDC Director and his teen assistant (TA) will be available to assist the staff, campers, and parents at any time during camp hours. The staff were chosen for their proven commitment to Christian values, leadership qualities, and their desire to work with children.

SCHEDULE

For the 2008 season we will have six (6) weeks of Day Camp. The weeks will be June 16th through the week of July 21st. We will be closed July 4th. We will be open Monday through Friday from 8am until 4:30 pm each day. A camper may sign up for one week or for as many weeks they wish - up to all six weeks; registration will be on a first come, first served basis.

ENROLLMENT FEES

The cost per camper per week is one hundred dollars (\$100.00). There is a discount of twenty dollars (\$20.00) per child for any additional children in the immediate family. During the 2008 season there are no scholarships available. The fee is due at least seven (7) days prior to attending. If the fee is not paid seven (7) days in advance the enrollment for that week may be suspended and the waiting list notified of the available space. There will be additional fees for any outside activities that we go on (field trips, etc.) Campers will need to bring their lunch each day as the Canal Lake CDC will not provide lunch. There will be a concession stand available in the afternoons if a child wishes to purchase a snack. Because we reserve space and that may result in turning someone away, nonattendance will be billed the full cost of the week. If Canal Lake CDC is informed at least fourteen (14) days in advance a week may be transferred to

another week if there is no conflict with an already full week. The enrollment fee covers insurance*, all materials for classes, and crafts. **Parent's insurance will be considered primary.*

RULES

All children must be signed in and signed out each day. Do not simply drop off your child at the door. This will help us to avoid confusion and keep your child safe. (When you register your child you will be notified as to where to sign your child in each day.)

If you do not pick up your child at the designated time (4:30pm) there will be an added charge of ten dollars (\$10.00) for each thirty minutes that you are late. Please notify the camp as soon as possible if you know you are going to be late, so arrangements can be made.

Doors will not be unlocked until 7:50 each morning.

Campers are not allowed to bring toys, trading cards, games, CD players, or radios to camp. Any item used to the distraction of other campers may be confiscated until the end of the day.

Disruptive campers can hinder the fun and learning of all and may receive time out or be removed from an activity if behaviors prevent the activity from proceeding smoothly. Campers who become aggressive or act in such a way as to present a possible harm to others will be separated from the group and the parents will be contacted. Continued and repetitive aggression or inappropriate behavior may result in your child being removed from camp with no refund.

GENERAL INFORMATION

Campers should wear comfortable school type clothing and shoes that stay on their feet. They will need to bring a towel and swim suit as we will be swimming nearly every day. Please label any item that you send with your child (esp. towels & lunch boxes) if you wish to have it back. Camp is an active place and items often get lost or misplaced.

Campers may wish to bring money as there will be a concession stand in the afternoons where they may purchase a snack.

Staff are always available to parents. You may leave a note for the staff leader of your child's group on the sign in sheets, or talk with the Director about any problems or concerns you may have.

Medication cannot be distributed without written permission from the parent. All medication must be clearly marked and given to the director with written instructions. Staff group leaders will be responsible for distribution. You may also list any medication instructions on the medical form that you fill out when you register.

Canal Lake Christian Day Camp Registration Form

NAME _____ AGE _____

PARENT /GUARDIAN'S NAME _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ CELL _____

EMAIL ADDRESS _____ GRADE _____

EMERGENCY CONTACT NAME _____

EMERGENCY CONTACT PHONE _____

CAMP WEEKS (check all that apply) **\$100.00 PER CAMPER PER WEEK**

___ JUNE 16TH – 20TH

___ JUNE 23RD – 27TH

___ JUNE 30TH – 3RD

___ JULY 7TH – 11TH

___ JULY 14TH – 18TH

___ JULY 21ST – 25TH

I PROMISE TO OBEY ALL CAMP RULES WHILE AT CANAL LAKE CDC.
CAMPER SIGNATURE

X _____

CANAL LAKE CDC IS PERMITTED TO TRANSPORT MY CHILD OFF-CAMPUS FOR SPECIAL EVENTS/ACTIVITIES. (FIELD TRIPS, ETC.)

___ YES _____ NO

PARENT/GUARDIAN SIGNATURE

X _____

CANAL LAKE CDC HEALTH INFORMATION

CAMPER'S LEGAL NAME _____

INSURANCE COMPANY _____

POLICY NUMBER _____

CAMPER'S DOCTOR'S NAME _____

DOCTOR'S PHONE # _____

ARE IMMUNIZATIONS UP TO DATE? (Diphtheria, Pertussis, Polio, Measles, Mumps, Rubella)

_____ **YES** _____ **NO**

IS CHILD EXEMPT FROM IMMUNIZATION REQUIREMENTS DUE TO RELIGIOUS OR MEDICAL REASONS? _____ **YES** _____ **NO**

DATE OF LAST TETANUS SHOT _____

IS CHILD ENROLLED IN GA STATE SCHOOLS? _____ **YES** _____ **NO**

DOES YOUR CHILD SUFFER FROM: (PLEASE CIRCLE)

ALLERGIES SEIZURES DIABETES SKIN CONDITIONS

ASTHMA LEARNING DISABILITY HEART PROBLEMS

HEARING IMPAIRMENT BLADDER OR BOWEL PROBLEMS

EMOTIONAL/BEHAVIORAL PROBLEMS

LIST ANY ALLERGIC REACTIONS: **BEE STINGS** _____ **PENICILLIN** _____

OTHER EXPLAIN _____

PLEASE LIST ANY MEDICATIONS BROUGHT TO CAMP

ALL PRESCRIPTION MEDICINES MUST CONTAIN A PHARMACY LABEL SHOWING PRESCRIPTION NUMBER, DATE FILLED, DOCTOR'S NAME, PATIENT'S NAME, NAME OF MEDICATION, AND DIRECTIONS FOR TAKING MEDICINE.

PARENT/GUARDIAN CONSENT FORM

WHEREAS, (my child) _____, wishes to be a camper at Canal Lake CDC which will be taking field trips, and,

WHEREAS, certain circumstances and situations may occur resulting in my child's need for medical/dental care and treatment, and further resulting in my inability to give personal consent for such care and treatment,

THEREFORE,

- 1.) In consideration of permission for my child to participate in said camp program, I, _____, being of legal age, authorize Canal Lake CDC or any agent of Canal Lake CDC , to act in my child's behalf should I be unable to do so and to consent to reasonable medical/dental care and treatment, including but not limited to diagnostic tests, x-ray examination, anesthesia, surgery, or any other procedures which may be deemed necessary for my child's medical well-being for the duration of the camp stay.**
- 2.) I recognize that this consent is given in advance of any specific diagnosis, treatment, surgery, hospital care, or any other procedures required, but is necessary to provide authorization and specific consent for medical/dental treatment care in my child's behalf due to the nature and destination of the program.**
- 3.) Any consent by Canal Lake CDC, or any agent of Canal Lake CED, shall have the same force and effect as if I had personally signed the consent.**
- 4.) I certify that I have personal health insurance with:**

Company _____ Policy # _____

with no territorial limitations, which will provide coverage for my child during the duration of said program. I understand that Canal Lake CDC will provide a small insurance plan, but any medical expenses exceeding that plan, resulting from medical treatment of _____ are my sole responsibility.

- 5.) I hereby release and hold harmless Canal Lake CDC, and their officers, and employees from all liability for bodily personal injury, rising as a result of medical/dental treatment given pursuant to this prior consent.**

- 6.) By signing below, I acknowledge and accept the risks of physical injury associated with participation in the camp program and field trips. Except for gross negligence on the part of the camp, I accept personal financial responsibility for any bodily or personal injury sustained during the camp program or field trips. Further, I promise to release and hold harmless Canal Lake CDD and its representatives for any injury related to the activity.
- 7.) If a dispute over this agreement or any claim for damages arises, I agree to resolve the matter through a mutually acceptable arbitration process.

SIGNATURE OF

PARENT/GUARDIAN _____

DATE _____

On this _____ day of _____, 2008, before me, the undersigned, a Notary Public in and for said state of _____ personally appeared _____, known to me to be the person who executed the within agreement and acknowledged to me that he/she executed the same for the purposes therein stated.

NOTARY PUBLIC _____

My commission expires: _____