



SAS Summer Camp Check List:

__ registration form

__ registration fee

__additional t-shirt payment \$10.00 ea.(T-shirts must be worn on off campus field trips)

__cancellation policy signed/photo permission signed

__emergency contact form

__movie permission slip form

__field trip permission slip form



Welcome to St. Alphonsus Summer Camp. To our new campers, we hope you have a wonderful summer spent with us. To our returning campers, thank you for joining us again. We can't wait for a fun filled summer!

We will be offering summer camp 7 weeks this summer. **Camp will run from 7:30-3:30 with an aftercare being offered for \$25.00 per camper per week. Hours of aftercare will be 3:30 to 5:30. If you aren't using aftercare your child must be picked up by 3:30. A late fee of 1.00 per minute will be charged per camper if campers aren't picked up by 3:30 for camp and 5:30 for aftercare.**

Reminders:

****Payment of 150.00 or 175.00 (for aftercare 3:30-5:30) per camper will be drafted the Monday of each week your child(ren) attends camp. ****You are responsible for payment for the weeks you signed up your child, EVEN IF YOUR CHILD WILL NOT BE AT CAMP. I must know a week in advance (the Monday before)

Start time: is 7:30 (no early drop offs). Drop off is in the cafeteria (the first door closest to the school office.) You must sign your child in and sign out every day.

Close time: is 3:30. We will be offering aftercare from 3:30 to 5:30 for an additional fee of 25.00 per child per week. The only people allowed to sign out your child are those that are listed on the emergency contact list. Please let us know if any additions need to be made to that list. If we don't recognize the person picking up your child, identification will be requested.

Bring a box lunch (no lunches are provided) we will provide breakfast (pop tart, go gurt) until 8:00 and snacks around 2:00 (goldfish, chips, etc.) Send a labeled water bottle for your child. Please no straws.

I can't stress this enough!!! Please label anything and everything that comes to camp.

Campers will be allowed electronic devices again this year that do not require internet usage. The campers are only allowed to play with the devices at certain times during the day. **Please label everything and be aware that we're not responsible for any lost, broken, or misplaced items.**
STUDENTS MAY NOT ACCESS THE INTERNET AT ANY TIME!

If your child is entering Pre K4 – 1st grade: Campers must bring a nap mat. They will nap or rest from 12:30-2:30 every day. Please bring a change of clothes for your camper- socks, undies, shorts and a shirt in a zip lock bag with name on bag.

Individual cubbies will be provided for every camper.

If you have any questions please don't hesitate to email me tfouts@stalphonsusbr.org or Dr. Ryals cryals@stalphonsusbr.org I can be reached through the school office Monday – Thursdays 8-1 during summer camp.

Sincerely,

Tammy Fouts

SAS Summer Camp Director

Dr. Cynthia Ryals

SAS Principal



St. Alphonsus School Summer Camp Registration Form
**** Due to space limitations, no late registrations will be accepted.**
Registration begins on March 7, 2022 and ends May 2, 2022

Child's Name _____

Grade (2022/2023 school year) _____ Age _____ (Students who have completed 5th Grade are eligible this year.) ***Child must be a registered student at St. Alphonsus School. Pre-K students must be 4 years old AND potty trained by June 6th to attend summer camp. **Students must be 4 years old by June 6.**

T-shirt size _____ (one t-shirt included in fees) **T-shirts must be worn on ALL off campus field trips**
Additional t-shirts @ \$10.00 each _____

Parent's Name _____

Phone Number _____ cell _____

Address: _____

Email : _____ (please print)

Please check off the week(s) for which you are registering your child. 2022 camp will run from 7:30-3:30 with aftercare hours being offered at an additional cost per camper per week. Hours of aftercare are 3:30-5:30.

_____ June 6th –June 10th		
_____ June 13 th -June 17 th	VBS	
_____ June 20th-June 24th		
_____ June 27 th - July 1st		
_____ July 5 th -July 8 th	(125.00)	NO CAMP on Monday, July 4th
_____ July 11 th - July 15th		
_____ July 18 th –July 22 nd		

Aftercare

_____ June 6th –June 10th		
_____ June 13 th -June 17 th	VBS	
_____ June 20th-June 24th		
_____ June 27 th - July 1st		
_____ July 5 th -July 8 th	(20.00)	NO CAMP on Monday, July 4th
_____ July 11 th - July 15th		
_____ July 18 th –July 22 nd		

Cost of SAS Summer Camp:

(One time, non-refundable) \$75.00 Registration fee per student.

Tuition: \$150.00 per week

Aftercare 25.00 per week

Tuition will be drafted the Monday of each week of camp through FACTS.

Please note cancellation policy. Campers must provide own lunch. Breakfast and Snacks will be provided.

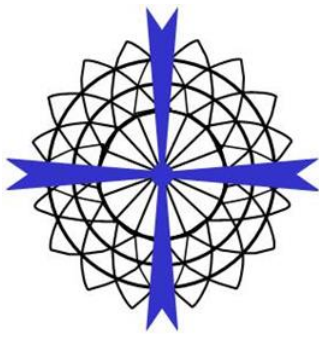
Camper Name: _____

CANCELLATION POLICY: St. Alphonsus Summer Camp has a one week cancellation policy. Failure to cancel on the Monday prior to the scheduled week will result in full payment for that week of camp, regardless of attendance. While we understand that last minute plans may come up, snacks, crafts, and field trips are paid for in advance for each week. By signing below, you acknowledge that you have read, understand, and agree to the St. Alphonsus Camp Cancellation Policy.

Signature _____ Date _____

I agree that, while my child is at St. Alphonsus Summer Camp, the name, voice and /or likeness of my child may be used in news publications, audiovisuals, and other electronic transmissions issued by employees or designees of St. Alphonsus Summer Camp. These information items include, but are not limited to photographs, videotapes, live broadcasts, sound recordings, and/or electronic transmissions related to the camp day, camp activities, and /or promotional or newsworthy events St. Alphonsus Summer Camp. I wave compensation or reimbursement of any kind related to the use of the above material for myself or the minor child.

Signature _____ Date _____



St. Alphonsus Catholic School Summer Camp Field Trip Permission Form

St. Alphonsus School Summer Camp plans many field trips throughout each week of the program. As a convenience, this permission slip will suffice for all planned activities during Summer Camp. By signing this permission slip, you are allowing your child(ren) to attend ALL trips scheduled.

1. In signing this form, I DO hereby give permission for my camper to leave SAS on all Summer Camp field trips. All campers will be under direct care of camp staff during field trips.
2. In signing this form, I DO hereby give permission for my camper to have sunscreen and insect repellent applied by a camp staff member if assistance is needed. SAS Summer Camp recommends a waterproof, long wearing formula no less than SPF30. For the insect repellent, it is recommended to avoid products that include DEET. (You may do your own research on DEET and sunscreen products.)
3. In signing this form, I ACKNOWLEDGE that Summer Camp is not responsible for any damage of an item brought to camp by my child.
4. In signing this form, I WILL, discuss with my child the appropriate behavior for Summer Camp. My child will abide by all rules and directions of the Summer Camp Staff. I acknowledge that my child may be removed from the trip for due cause including disruptive behavior, illness, use or possession of alcohol or controlled substances, a weapon, or dangerous instrument. The student will be returned to the custody of the parent/guardian who shall be responsible for all costs of this action.
5. In signing this form, I WILL notify in writing about how to communicate with an authorized person who may receive and act upon emergency messages concerning my child if I am unavailable.
6. In signing this form, I DO hereby consent and authorize SAS Summer Camp staff to take any and all action, including use of medical services and hospital facilities as they deem appropriate in the event that my child should become ill or otherwise injured under the care of the Summer Camp program.
7. In signing this form, I RELEASE SAS Summer Camp from all claims of injury, which may be sustained by my child while participating in any SAS Summer Camp sponsored activity, whether caused by negligence of the Summer Camp program or otherwise.
8. In signing this form, I RELEASE the agents, employees and representatives of SAS Summer Camp, from all claims, liability, and damages for personal injuries, property damage, or other loss arising from participation in Summer Camp field trips.
9. In signing this form, I AGREE, with the understanding that my child will be responsibly supervised, that I will not hold the SAS Summer Camp staff, St. Alphonsus School and its administration, nor any other chaperones responsible for events or situations beyond their control.

Camper's Name _____ Age _____
Camper's Name _____ Age _____
Camper's Name _____ Age _____

Parent's Name (printed) _____ Signature _____

Cell Phone _____ Work Phone _____



Emergency Contact Information
(Required for each child enrolled)

Child's Name _____

Birthdate ____/____/____ Grade 2022/2023 _____

Parent's Name _____

Address: _____

Phone Number: Home _____

Cell _____

Emergency Contacts:

Name _____ relationship to child _____

Phone number: _____

Name _____ relationship to child _____

Phone number: _____

Name _____ relationship to child _____

Phone number: _____

Medical Information: Please list any medications your child is taking and any allergies we need to be aware of for summer camp.

St. Alphonsus School

13940 Greenwell Springs Road, Central, LA 70739

Telephone 225- 261-5299

FAX 225-261-2795

Mrs. Cynthia Ryals,
Principal

MOVIE PERMISSION SLIP

Summer Camp will be going to the movies at Celebrity Theaters. Some of the movies are rated PG. We need parental permission in order for your child to participate.

_____ **Yes**, my child has my permission to view the movies.

_____ **No**, I do not want my child to participate in this activity.

Student Name _____

Parent Name _____
(Please Print)

Parent Signature _____

Contact # _____

Permission slip must be returned with registration.