



## Summer Camp Application

Dear Parent/Guardian,

Thank you for choosing The Haven for your child during the summer! Our goal is to provide a motivating, positive, therapeutic, and most importantly *fun* environment for your child. Please review the following policies and complete all the enclosed forms in your application packet.

### Application Process:

Please note the application does not guarantee acceptance of your child into the program. We strive to provide a positive and beneficial experience for all the children enrolled. For this reason, some children may be accepted on a trial basis to ensure that he or she will benefit from our camp. Space is limited, and we encourage you to apply at your earliest convenience.

After we receive your application, we will schedule a meeting where we can learn more about your child. Contact our team by email if you have any questions or concerns. Email is our primary means of communication with you regarding camp announcements.

Please be sure to provide a valid email address to:

Travis Ebersole, Haven Academy Director Email— <a href="mailto:tebersole@thehavensrq.org">tebersole@thehavensrq.org</a>
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### 2022 Summer Program Dates:

June 7th- July 29<sup>th</sup> (8 weeks)

Monday to Friday 7:30am to 3:00pm

### Payment

*\*The application fee is nonrefundable.*

\*Tuition payment for the first week is required at the time of application. Weekly tuition **must** be paid prior to the start of each week.

*\*The Haven reserves the right to dismiss a student from the summer program due to inappropriate placement and/or behavior that endangers themselves or others.*



# THE HAVEN

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### **Sick Policy**

Your child will be sent home if he or she has any of the symptoms below. For the well-being of all the program staff and other children, please keep your child at home if he or she has any of the following Symptoms:

- 1) A fever of 101 or higher. If you child has had a fever, he or she must be fever free for 24 hours before returning to the camp.
- 2) Vomiting
- 3) Visible mucus (green/yellow)
- 4) Conjunctivitis (pink eye)
- 5) Diarrhea
- 6) Head Lice

Children exhibiting the above symptoms will be sent home.

### **Pick up**

Your child must be picked up at the allotted time. A late fee of \$1 will be incurred for every 5 minutes that the parent/guardian is late. This charge will be reflected on your next invoice.

### **Supplies**

All students are required to bring lunch, drinks and daily snacks.

**I have reviewed the above policy and hereby give my consent for my child \_\_\_\_\_  
to participate in the 2021 Summer Camp. (Child's name)**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date



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**Please indicate the weeks you would like to enroll your child.**

- Blast Off Into Summer Week** June 7<sup>th</sup>-10<sup>th</sup>
- Time Traveler Week** June 13<sup>th</sup>-17<sup>th</sup>
- Shark Week** June 20<sup>th</sup>-24<sup>th</sup>
- Culinary Week** June 27<sup>th</sup>-July 1<sup>st</sup>
- Sensory Week** July 6<sup>th</sup>-8<sup>th</sup> (Camp closed July 4<sup>th</sup>-5<sup>th</sup>)
- Hollywood Week** July 6<sup>th</sup>-8<sup>th</sup>
- Art Week** July 18<sup>th</sup>-22<sup>nd</sup>
- Sensory Week** July 11<sup>th</sup>-8<sup>th</sup>
- Battle of the Champions Week** July 25<sup>th</sup>-29<sup>th</sup>

### **Tuition**

Do you currently attend Haven Academy? Circle YES or NO

Request for Scholarship Assistance

### **Weekly Camp tuition:**

\$135 per week *All weeks registered must be paid the Friday before the week begins*  
Registration fee \$50 (non refundable, one time fee)

There are no cancellations. Please understand that when you register for the week your seat is reserved and does not allow for another child to attend. Should you choose not to attend a week you registered for you are still responsible for payment for that week.

We **DO NOT** offer day rates, weekly only\*



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### **Background Information:**

Parent/Guardian's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Present School Grade: \_\_\_\_\_ Name of the School \_\_\_\_\_

**McKay Scholarship Matrix (circle one):**      251      252      253      254      255

What classroom setting is your child currently enrolled? \_\_\_\_\_

**Parent/Guardian's Name:** \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Telephone: (\_\_\_\_\_) \_\_\_\_\_ Cell phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

**Parent/Guardian's Name:** \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Telephone: (\_\_\_\_\_) \_\_\_\_\_ Cell phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

With whom does the child live with? \_\_\_\_\_

Emergency contact: \_\_\_\_\_

Please list the name(s) of individuals authorized to pick up your child:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_