



## Emmanuel Christian Academy 2020 Summer Program

Greetings!

We are looking forward to summer camp at ECA! The students and teachers had a GREAT time last summer! Once again, camp will be open to any students who are entering grades K4-6. Please feel free to pass this information along to other families looking for a great Christian summer camp. Mrs. Billi Jo Nichols will again be directing the program.

Mrs. Nichols is Emmanuel Christian Academy's K-5 teacher. She has been an elementary teacher for the past 19 years. Before coming to Emmanuel Christian Academy, she spent many years assisting her school with a summer day camp program. She is excited to spend the summer with your child!

We are beginning to plan the weekly themes and activities and I can, without hesitation, confirm that the summer camp program is gearing up to be a fun-filled, action-packed adventure!

Please return your completed enrollment paperwork as soon as possible. The registration fee of \$50 per student is waived if you register before March 6, 2020. After March 6, 2020, your registration payment must accompany your paperwork in order to finalize your registration.

Our teachers are thrilled to spend time with your camper this summer at ECA!

Sincerely,

Pastor Jon Riopel

\*Please direct any questions to the ECA office: 860-667-3407

## FEE SCHEDULE

### REGISTRATION

|                      |      |
|----------------------|------|
| Before March 6, 2020 | Free |
| After March 6, 2020  | \$50 |

### TUITION

|                             |              |
|-----------------------------|--------------|
| 4-5 Day Program (Full-Time) | \$170 weekly |
| 3 Days / Half-Day Program   | \$125 weekly |

Multiple Student discount for full-time students:

|               |              |
|---------------|--------------|
| Second Child  | \$125 weekly |
| Third Child + | \$100 weekly |

*\*Full time campers that sign up for at least ten weeks of camp will receive a \$20 weekly discount off of the 1st child.*

### BEFORE / AFTER CARE ( 7AM-8AM, 4PM-5:30PM)

|                         |               |
|-------------------------|---------------|
| Before / After Care Fee | \$10          |
| After 5:30pm            | \$20 per hour |

*\*Before Care and After Care arrangements must be made in advance*






1. Payments will be billed on a weekly basis through FACTS.
2. New families to our school will need to create a FACTS account at the following link:  
<https://online.factsmgt.com/signin/3JHM3>
3. A late fee of \$30 will be added to the account for payments not received 10 days after the due date. A payment that is not received 10 days after the due date will result in a child not being allowed to attend the program until said payment is made.

### PARENT/GUARDIAN BILLING AGREEMENT

1. Additional minimal fees will be charged for field trips such as: splash pads, parks, mini golf, etc.
2. ALL accounts with ECA must be at a zero balance before a child can be considered enrolled or attend.
3. Any days I sign up for will be billed regardless of attendance, unless changes are clearly communicated to the camp director at least 7 days prior to a cancelled/added date. Any additional days will be billed according to the tuition rate plans.
4. Hot lunches will be available daily for \$5:

|                           |  |
|---------------------------|--|
| Monday   Hot Dogs         | Wednesday   NO HOT LUNCH                     |
| Tuesday   Chicken Nuggets | Thursday   Macaroni & Cheese                 |
| Friday   Pizza            | *Each meal will come with chips and a drink. |

## CAMP WEEK THEMES

| WEEK | THEME             | FIELD TRIP   | COST |
|------|-------------------|--|------|
| 1    | Camping           | N/A  | N/A  |
| 2    | Disney            | Flight   | \$10 |
| 3    | Hawaiian          | Jacob's Dream Park      | \$5  |
| 4    | Farming           | Hiking                  | \$5  |
| 5    | Safari            | Safari Golf  | \$10 |
| 6    | Patriotic         | Bowl-A-Rama (Tuesday)  | \$10 |
| 7    | Christmas in July | Regal Movie  | \$5  |
| 8    | Beach             | Splash Pad              | \$5  |
| 9    | Super Hero        | Pump It Up - Rocky Hill  | \$10 |
| 10   | Dr. Seuss         | Noah Webster Library  | \$5  |
| 11   | Sports            | Imagine Nation Museum  | \$10 |
| 12   | Community Helpers | Splash Pad            | \$10 |

 = Ice cream included on field trip

# Guidelines / Student Commitment

*Please go over the following guidelines with your child:*

I make a commitment to God, myself and the Emmanuel Christian Academy Summer Camp staff to comply with the following guidelines:

1. I will use my inside voice at Summer Camp. I understand that this shows self-control and expresses my best character.
2. I will keep my hands, feet and all other body parts to myself. This shows that I respect my friends and Summer Camp family.
3. I will use all furniture in the correct way. This includes use of computers, keyboards, monitors, tables, chairs, creative centers, desks, couches, carts, van/car seats, etc... This shows that I respect the Summer Camp property.
4. I will follow instructions, responding the first time I am asked. This reveals my confidence and respect for self and others.
5. I will speak politely to my friends and to the Summer Camp staff members. I will refrain from arguing and/or talking back to staff members. This shows respect for others, myself, and my reputation.
6. I will not bully my friends or Summer Camp family members. This means that I will refrain from intentional verbal or written name-calling, hiding or taking another person's belongings, teasing, hitting or throwing objects at another person or any other demeaning or excessive behavior that is intentionally directed at another person.
7. When it is time to go home, I will clean up and put away toys and will quickly meet my parent(s). This shows that I care about my program and that I and my parents are supporting each other in learning how to be responsible.
8. I will use words that are respectful and pleasing to God. This means that I will choose my words carefully when I think, speak, write or input words on the computer keyboard.

## Electronic Device Usage

Electronic devices may be brought to camp but an “At Your Own Risk” policy will be administered. If an electronic device is brought in, it **MUST** be turned in at Check-In Time. The Summer Staff will allow it to be checked out at appropriate times. It is the PARENTS' responsibility to make sure that all personal electronic devices are taken home at Check-Out Time (ECA is not responsible for any lost or stolen electronic devices).

# Dress Code

The following guidelines are provided to assist you in making decisions on what to wear during Summer Day Camp:

1. Please send in a towel and an extra pair of clothing (including underwear) in a ziplock bag along with sunscreen with your child's name on it. **Towels and swimwear will be sent home weekly to be cleaned.**
2. **Shirts (including T-shirts):** Please choose shirts that help to express good character. Slogans, sayings, or advertisements which are objectionable should be avoided. No strapless tube tops or shirts that expose the midsection and/or any undergarments.
3. **Shorts or pants:** Please wear pants, capris or knee-length shorts.
4. **Shoes must have a back - NO Flip-flops**  
*\*We will have many running activities and flip-flops may cause injuries.*
5. **Sunscreen:** Please put SUNSCREEN on your child PRIOR to their arrival. You may also send in sunscreen (Spray Only) but please LABEL the container. The sunscreen will remain at Summer Camp for the duration of the program.
6. Please send a water bottle with your child every day.
7. Please dress your student in dark clothes on water days.

The Emmanuel Christian Academy Camp Director and staff members, in consultation with the child/youth and parent, reserve the right to have the final word on excessive, exaggerated, faddish or safety dress code concerns.

# Enrollment Form

*\*Please fill out carefully and return before May 1, 2020.*

## GENERAL INFORMATION

Student's Full Legal Name: \_\_\_\_\_ Grade Entering for 2020-2021: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Age at start of 2020-2021 school year: \_\_\_\_\_ Gender: Male | Female

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## FAMILY INFORMATION

Father's (or Male Guardian's) Full Name: \_\_\_\_\_

Father's Email: \_\_\_\_\_ Father's Cell: (\_\_\_\_\_) \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Mother's (or Female Guardian's) Full Name: \_\_\_\_\_

Mother's Email: \_\_\_\_\_ Mother's Cell: (\_\_\_\_\_) \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Family Status: Married | Divorced | Widowed | Remarried | Single Parent

If the child is not living with both parents, please circle with whom he lives:

Mother Only | Father Only | Other Please Explain: \_\_\_\_\_

Please circle the days/times in which your child will be attending.

\*Any cancellations/additions to the days marked must be communicated at least 7 days prior to a cancelled/added date.

\* Days highlighted in red indicate days we are closed

|                         |                           |                |               |
|-------------------------|---------------------------|----------------|---------------|
| Week 1   May 26-29      | <b>M</b>   T   W   Th   F | Drop Off _____ | Pick Up _____ |
| Week 2   June 1-5       | M   T   W   Th   F        | Drop Off _____ | Pick Up _____ |
| Week 3   June 8-12      | M   T   W   Th   F        | Drop Off _____ | Pick Up _____ |
| Week 4   June 15-19     | M   T   W   Th   F        | Drop Off _____ | Pick Up _____ |
| Week 5   June 22-26     | M   T   W   Th   F        | Drop Off _____ | Pick Up _____ |
| Week 6   June 29-July 2 | M   T   W   Th   <b>F</b> | Drop Off _____ | Pick Up _____ |
| Week 7   July 6-10      | M   T   W   Th   F        | Drop Off _____ | Pick Up _____ |
| Week 8   July 13-17     | M   T   W   Th   F        | Drop Off _____ | Pick Up _____ |
| Week 9   July 20-24     | M   T   W   Th   F        | Drop Off _____ | Pick Up _____ |
| Week 10   July 27-31    | M   T   W   Th   F        | Drop Off _____ | Pick Up _____ |
| Week 11   August 3-7    | M   T   W   Th   F        | Drop Off _____ | Pick Up _____ |
| Week 12   August 10-14  | M   T   W   Th   F        | Drop Off _____ | Pick Up _____ |

# 2020 Summer Camp Emergency Information, Releases, and Authorization

## Emergency & Medical Information

Student Name (1) \_\_\_\_\_

Allergies, Conditions, Medications, Special Needs, etc \_\_\_\_\_

Student Name (2) \_\_\_\_\_

Allergies, Conditions, Medications, Special Needs, etc \_\_\_\_\_

Student Name (3) \_\_\_\_\_

Allergies, Conditions, Medications, Special Needs, etc \_\_\_\_\_

Student Name (4) \_\_\_\_\_

Allergies, Conditions, Medications, Special Needs, etc \_\_\_\_\_

Insurance/Care Provider: \_\_\_\_\_ Group/Medical #: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Preferred Hospital: \_\_\_\_\_ Phone: \_\_\_\_\_

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

*People to contact in case of emergency or illness, and who also can pick up my student(s) from ECA.*

|                          |            |                        |
|--------------------------|------------|------------------------|
| Parent/Guardian Name (1) | Cell Phone | Relation to Student(s) |
|--------------------------|------------|------------------------|

|       |       |       |
|-------|-------|-------|
| _____ | _____ | _____ |
|-------|-------|-------|

|                          |            |                        |
|--------------------------|------------|------------------------|
| Parent/Guardian Name (2) | Cell Phone | Relation to Student(s) |
|--------------------------|------------|------------------------|

|       |       |       |
|-------|-------|-------|
| _____ | _____ | _____ |
|-------|-------|-------|

|                     |            |                        |
|---------------------|------------|------------------------|
| Additional Name (1) | Cell Phone | Relation to Student(s) |
|---------------------|------------|------------------------|

|       |       |       |
|-------|-------|-------|
| _____ | _____ | _____ |
|-------|-------|-------|

|                     |            |                        |
|---------------------|------------|------------------------|
| Additional Name (2) | Cell Phone | Relation to Student(s) |
|---------------------|------------|------------------------|

|       |       |       |
|-------|-------|-------|
| _____ | _____ | _____ |
|-------|-------|-------|

OVER >

**Authorization for Emergency Medical Services**

In the event of a medical emergency, I understand that every effort will be made to contact the parent(s) or guardian(s) of the student. In the event that I cannot be reached, I hereby give permission to the staff of Emmanuel Christian Academy to hospitalize and/or secure proper treatment for my child. I also affirm that the medical information stated in this form is complete and accurate.

**Authorization for Excursions and Field Trips**

I hereby consent to have my child participate in walks, field trips, and special outings (by car, bus, or van) supervised by the teaching staff, away from school grounds to points of interest throughout the year. I understand that I will be notified by my student’s teacher should such outings and of any cost associated with it.

**Authorization For Use of Comments and Pictures of a Minor**

Emmanuel Christian Academy (ECA)/ Emmanuel Baptist Church (EBC) is hereby authorized to take or permit pictures to be taken of my child(ren)

\_\_\_\_\_ ,  
a minor or minors, for use by ECA/EBC in publications, newspapers, newsletters, its website, and/or on television for purposes of public relations for ECA/EBC. ECA/EBC shall also have the right to use any portion of any statement made by my child in any publication, newspaper, newsletter, or website.

This agreement contains all understandings, oral and written, of the parties and supersedes all previous agreements. If any portion of this Agreement is found to be invalid or unenforceable, it shall not affect the balance of this agreement. This agreement will be governed by the law of the State of Connecticut.

**Student Agreement**

I understand the Dress Code and Student Commitment and will follow them to the best of my ability. I also understand that if I fail to keep my commitment, I may be corrected by an Emmanuel Christian Academy Summer Camp staff member and my parents may be notified.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Parent/Guardian Agreement**

I understand that by signing my child up for the Summer 2020 Program, I am agreeing to all of the terms and policies stated above in the 2020 Summer Program packet.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Daily Lunch Opt-In**

*We would like to purchase a hot lunch every day*