Summer Camp 2020

At Courtyard School

* Open to the public (5 years old - 8th grade)



- * Air-conditioned and ventilated campus
- * Engaging indoor and outdoor activities

- * Flexible hours: 7:00 a.m. to 6:00 p.m.
- * On-site and distance options available
- * On-site tuition includes breakfast, lunch, afternoon snack, daily activities, weekly field trips or events, academic enrichment, and before and after camp care

- * Weekly on-site events
- * CPR and First Aid certified staff
- * Popular weekly themes such as Cooking, The Arts, Travel, Teambuilding, Imagination, and Spy Academy
- *Daily academics

In this extraordinary time, our campus has made adjustments to allow for an on-site campus experience with all CDC recommendations in place. We will also be offering a distance option for families who are interested in being able to participate in camp from home. Our experienced, caring, and professional staff provide campers with the opportunity to have fun and continue learning throughout the summer, through weekly themes, on-site events, activities tailored for each age group, and daily academic enrichments.

Campers each receive their own Summer Bridge academic review workbook which they work in daily during camp to retain their classroom skills and enter their new grades in the fall feeling confident and prepared.

Our camp day and activities are from 9:00 a.m. to 3:00 p.m. For your convenience, we also provide before camp care (7:00 a.m.-9:00 a.m.) and after camp care (3:00 p.m.-6:00 p.m.)

Courtyard has a strict late pick up policy. If your child is still on campus after 6:00 p.m. there will be an additional charge.

Please refer to the Camper Information and Registration Form for weekly themes and field trips.

Courtyard Summer Camp 2020 Registration Form

Thank you for choosing Courtyard Summer Camp 2020 for your child! Please complete the Registration Form and Form 1 on the following pages and email it to Ms. Rose, our Office Manager at rgreen@courtyard.org.

*REGISTRATION INFORMATION AND INSTRUCTIONS:

*Sign up for Summer Camp by Friday, June 12th, 2020. Please be sure to have your paperwork turned in by this date. Late registration will depend on available spaces.

*Pricing is as follows (per child):

- o On-site rate:
 - Courtyard Students: \$350.00/week
 - Non-Courtyard Students: \$400.00/week
- o <u>Distance rate:</u>
 - Courtyard Students: \$200.00/week
 - Non-Courtyard Students: \$225.00/week
- The week of June 29th-July 2nd is discounted due to closures (Closed July 3rd):
 - On-site for Courtyard Students: \$280.00/full week
 - On-site for Non-Courtyard Students: \$320.00/full week
 - Distance for Courtyard Students: \$160.00/full week
 - Distance for Non-Courtyard Students: \$180.00/full week
- o 10% discount for siblings

*Your child is enrolled once the completed registration form, and Form 1 are received, and the first week of camp fees are paid. Camp fees are not billed: They are due in advance, the Monday prior to the first day of each camp week your child will attend.

*Please be advised that there is no Summer Camp the weeks of June 15th-19th, August 24th-28th, & August 31st-September 4th.

For further information, please contact Heather Dominguez-Cuevas at hdominguez@courtyard.org or call (916) 442-5395. Ms. Rose is also available to answer questions about Summer Camp (rgreen@courtyard.org).

CAMPER INFORMATION AND REGISTRATION FORM

| Camper's Name: | Camper's Grade in fall '20: |
|--|-----------------------------|
| Indicate Camper's Shirt Size: (children's sizes) | Male/Female/Other: |
| Small Medium Large X-Large Adult Medium | |
| Parent/Guardian: | |
| Address: | |
| | |
| Work #: | |
| | |
| Home #: | |
| Email: | |
| Cell #: | |
| | |
| | |

| Selection (D* or O) | <u>Week</u> | <u>Theme</u> | Sample On-site Events |
|-----------------------|----------------------|--|--|
| | | | |
| | June 22-26* | Art/ Appiont Art 9 Coulpture | National Traggues Cogyanger Hunt |
| | Julie 22-20 | Art/ Ancient Art & Sculpture | National Treasure Scavenger Hunt |
| | June 29- July 2 | Spy Academy | Top Secret Mission |
| | July 6-10 | Literature/ Fairy Tales, Myths, & I Tales | Legends Puppet show and Campfire |
| | July 13-17 | Around the World/Travel & Adver | nture Journey around the World |
| | July 20-24 | Animals and Habitats | Science Demonstration/Animal Visit |
| | July 27-31 | Movies, Music, & Movement | In class Movie Theater/ Social Distance Concert |
| | August 3-7 | Cooking/ Culinary Arts | Courtyard's Top Chef |
| | August 10-14 | Sci-Fi/ Time Travel | Space Command Center Mission |
| | August 17-21 | Superhero | Superheros Unite! |
| Please note D for dis | stance learning camp | or O for on-site camp | |



In the event of a schoolwide emergency, it is important that we have the most complete information about how to contact you. Please complete this form with as much detail as you can and provide updates as contact information changes.

| CHILD'S LAST NAME | FIRST | INITIAL | SEX | DOB | GRADE |
|---|---|---------------------------------------|---------------------|----------------------|------------------|
| 1 ST PARENT CONTACT: | | | | | |
| NAME | | HOME | _ | WORK | <u> </u> |
| CELL | EMAIL. | | | | |
| HOME ADDRESS | CITY | | Z | P | |
| OCCUPATION | | EMP | LOYER | | |
| 2 nd PARENT CONTACT: | | | | | |
| NAME | , | HOME | | WORK | |
| CELL | EMAIL. | | | | |
| HOME ADDRESS | CITY | | Z | P | |
| OCCUPATION | | EMP | LOYER | | |
| IN THE ABSENCE OF PARENT(S), CA | ALL: | | | | |
| 3 RD CONTACT | HOM | - | w | ORK | |
| CELL | EMAIL | · · · · · · · · · · · · · · · · · · · | | | |
| HOME ADDRESS | * *** *** *** *** * | | | · | |
| In the event of an emergency, I would PLEASE INDICATE ACTION DESIRED | | | | (BOX 1 OR 2) | |
| 1. In the event of an accident or other eme considers necessary for my child to raceive me below to undertake such care and treatment of treatment to be performed by any licensed phy | dical or hospital care, including my child as he/she considers | g necessary transports | ition. Under such d | rcumstances, I furth | er authorize the |
| PHYSICIAN NAME | MEDI | CAL REC. NO. | | LITARY I.D. NO. | |
| PHYSICIAN ADDRESS | | PHY | SICIAN PHONE | | |
| 2. ☐ I do not choose the above stateme | nt and desire the following | action | | | |
| | | | | | |
| THE UNDERSIGNED HEREBY AGREE | S TO BEAR ALL COSTS | INCURRED AS A F | ESULT OF THE | FOREGONIG. | |
| THE UNDERSIGNED HEREBY AGREES X PARENT'S SIGNATURE | S TO BEAR ALL COSTS | INCURRED AS A F | | FOREGO!!\G. | - |