

Day Camp
(rising 3rd – current 5th)

Child's Name _____
Referred by: _____

Will your child be attending after school in the Fall?: Yes/No FT, 3d/week, 2d/week
(August 10th is the first day of school).
Name of School: _____

Please circle the days your child will attend during each week.

Week: FT/3 Days/2 Days

<u>Week</u>	<u>Days</u>	<u>FT / 3D / 2D</u>
1) May 22-29	F T W Th F:	\$283/214/185
2) June 1-5	M T W Th F:	\$283/214/185
3) June 8-12	M T W Th F:	\$283/214/185
4) June 15-19	M T W Th F:	\$283/214/185
5) June 22-26	M T W Th F:	\$283/214/185
6) June 29-July2	M T W Th:	\$248/214/185
7) July 6-10	M T W Th F:	\$283/214/185
8) July 13-17	M T W Th F:	\$283/214/185
9) July 20-24	M T W Th F:	\$283/214/185
10) July 27-31	M T W Th F:	\$283/214/185
11) Aug. 3-7	M T W Th F:	\$283/214/185

Activity Fee: \$120

Registration: \$35

Cancellation/ Change Policy:

Submit Registration forms prior to May 1st and receive 10% discount of 1st week attending.

Sign up by May 1st to receive camp T-shirt.

Activity fee is prorated for enrollment less than two (2) weeks.

Current Students/Alumni do not pay camp registration fee.

Please inform the office of your vacation plans (no need to know the exact dates, so allowance can be made).

There is no cancellation or refund after May 22nd.

**Morning Star
Summer Camp Registration**

Camper's Name: _____
Address: _____
City: _____ Zip: _____

Home Phone (____) ____ - _____

Birth Date (Month/Day/Year) ____/____/____ Age _____ Sex (M / F)

Grade (Upcoming School Year) _____
School: _____

Mother's Name: _____ Business: _____
Phone: _____
Email Address: _____
Cell: _____

Father's Name: _____ Business: _____
Phone: _____
Email Address: _____
Cell: _____

My child has been to day camp before: Yes No
During camp child resides with: (Check if applicable)
____ Mother and Father ____ Parents are separated
____ Mother ____ Parents are divorced
____ Father ____ Other (Relationship to child) _____

Every child will receive a T-Shirt: Child's Size: S M L Adult's Size: S M L

Does your child have a food allergy or a food preference? Y/N

Any personal medical information you want us to be aware of:

Parent's Signature _____
Date ____/____/____

(Please label all your child's belongings)

****There is no cancellation or refund after May 22nd.**

Day Chaperone List

Please check the list below which trips you plan to attend with your camper. Each trip requires a minimum of two (2) chaperones. We will contact you a week prior to the trip to confirm that you will attend.

Child's Name: _____

Parent's Name: _____

Phone Number: _____

- May 26th** **Maryville Ropes Course 8:30-1:00**
- May 28th** **Splash Country 8:30-5:30**
- June 3rd** **Knoxville Zoo 9-4**
- June 4th** **Oak Ridge Pool 2-5**
- June 9th** **Splash Country 8:30-5:30**
- June 10th** **Movies TBD**
- June 11th** **Bob Leonard Park 9-1**
- June 16th** **Beardsley Community Farm 8:30-12**
- June 18th** **EYF Kitchen/Gym 9:30-2**
- June 23rd** **Knox Arts and Crafts 9-12**
- June 25th** **Splash Country 8:30-5:30**
- July 1st** **Ripley's Aquarium 8:30-4**
- July 7th** **Splash Country 8:30-5:30**
- July 8th** **WonderWorks 8:30-4**
- July 9th** **Lenoir City Pool 2-5**
- July 14th** **Pump It Up 2-4:30**
- July 16th** **Karns Pool 2-5**
- July 21st** **EYF Gym 10-1**
- July 23rd** **Splash Country 8:30-5:30**
- July 27th** **UTS TBD**
- July 28th** **Adventure Park 9-11:30**
- July 30th** **Loudon Pool 2-5**
- August 4th** **Splash Country 8:30-5:30**

Splash Country Registration Form

Does your child have a pass that they will renew? Y / N

Will you purchase your child's pass on the first trip? Y / N

Please check the days your child will be going to Splash Country:

- Thursday, May 28th**
- Tuesday, June 9th**
- Thursday, June 25th**
- Tuesday, July 7th**
- Thursday, July 23rd**
- Tuesday, August 4th**

Field Trip Permission

My child _____ has my permission to go on any and all field trips with Morning Star Child Development Center Summer Camp or Kindergarten Camp as scheduled, emailed, communicated on Facebook, and/or posted. My child has permission to ride on the Morning Star buses with their designated drivers, or in a chaperone's car with prior notice.

Swim Waiver

****ALL PARTICIPANTES, PARENTS OR GUARDIANS OF ANY CHILD WHO WISHES TO PARTICIPATE IN ANY SWIMMING PROGRAM OR ACTIVITY MUST COMPLETE THE FOLOWING PROGRAM RELEASE FORM BEFORE THEIR CHILD MAY BEGIN THE PROGRAM ACTIVITY.****

Release/Disclaimer

I do hereby assume full responsibility for any and all injuries that my child may sustain or incur, if any, while attending, practicing, participating in any swimming program. I hereby waive all claims and release and hold Morning Star CDC, it's instructors individually or otherwise, harmless for any and all claims for injuries and damages.

In consideration of my child's participation in and the use of the pool, I hereby release MSCDC of any future claims/law suites due to any injury that my child may sustain due to this activity.

Yes _____
No _____

Photo Release

There are occasions where we take pictures of the children while they are here at Morning Star. These pictures may be taken while outside, playing, during water play, at a school party, while on a field trip, or other various Morning Star activities. We sometimes like to post some of these pictures in the center, on Moring Star's website (www.morningstarchild.com) as well as the Morning Star Facebook Page. **We do not post names with any of these pictures.**

_____ Yes, Morning Star has permission to put pictures of my child on their website, Facebook page, and/or display in the center.

_____ No, Morning Star does not have permission to put pictures of my child on their website, Facebook page, and/or display in the center.

Sunscreen Release

_____ Yes, Morning Star has my permission to apply sunscreen to my child

_____ No, Morning Star does not have permission to apply sunscreen to my child.

If there is a sunscreen allergy please let the camp counselors know and provide the kind that they can use.

Please describe any sunscreen allergy:

I HAVE READ AND FULLY UNDERSTAND THE ABOVE RELEASE/WAIVER FORMS, AND I SIGN THIS FORM VOLUNTARILY.

Child's Name: _____

Print Parent's Name: _____

Parent Signature: _____

Date: _____

MSCDC Camp Behavioral Contract

In order for us to have a fun summer together, I _____ will be respectful of my fellow campers, staff, and property, and abide by safety regulations at all times.

In accordance with this, I _____

- will never cause bodily harm to another camper or staff.
- will respect the property of others and the center.
- will be respectful in my language towards staff.
- will never bully another camper.
- will follow all safety guidelines especially on the buses, field trips, and at the pool.

On the rare occasion that I break any of the above:

- 1st occurrence
 - I understand that my parent or guardian will be called.
- 2nd occurrence
 - I understand that not only will my parent or guardian be called but that I will be excluded from the next field trip or special event.
- 3rd occurrence
 - I understand that not only will my parent or guardian will be called but I will not be allowed to remain in Morning Star Summer Camp.
 - I understand that Morning Star Management has the final discretion.

Please sign below that you and your camper understand the above. Thank you.

Parent Name _____

Parent Signature _____

Camper's Name _____

Camper's Signature _____

Date: _____