

JESUIT

SUMMER DAY CAMP

About Jesuit Day Camp

Jesuit offers a fun-filled summer day camp for boys ages 5–12. Summer Day Camp hours are from 9 a.m.–3 p.m. Doors open at 8:30 a.m. There are two Three-Week Day Camp sessions that run from June 4–June 22 and June 25–July 13.

Summer Camp Session 1 is now full. Registration for Session 2, Weeks 4–6 (June 25–July 13), is still available.

Campers can also choose to attend weekly for an additional cost. Sibling discounts are available.

See page 2 for details and cost.

Camp Activities

Camp activities include: field trips and tours, swimming, bowling, softball, kickball, Laser Tag, movies, Bounce Spectrum, flag football, basketball, picnics, and more! Registration Includes: Two Jesuit Summer Day Camp t-shirts, a sports bottle, and a camp bag

Safety & Certifications

All coaches and counselors are CPR and AED certified. The coaches on staff drive the Jesuit High School Bus for trips off campus.

Lunch & Concessions

Monday–Thursday, campers may order lunch (\$1.50–\$2.50 each for a hot dog, hamburger, chicken sandwich, or nachos). Campers must bring a bag lunch with a drink on Fridays.

Drinks and snacks are sold during lunch and after camp for \$0.50–\$2 each. Items may include: sports drinks (G2), soft drinks, candy, and chips.

Day Camp Shirts

All campers must wear their Jesuit Day Camp shirt everyday. Additional shirts can be purchased for \$10/each.

Water Bottles

Each camper must bring the provided sports bottle

ABOUT SUMMER DAY CAMP

If you have any questions about Jesuit Summer Day Camp, contact Troy Baglio at baglio@jesuitnola.org or call (504) 251-1204.

for hydration during the day. Water coolers filled with ice water are provided for campers to refill their bottles throughout the day.

Before & After Care

Before and After Care is available upon request. Before care starts at 7:30 a.m. After care starts at 3:30 p.m. and ends at 5:30 p.m. Cost: \$5/hour, paid daily.

Registration Includes

Campers will receive two official camp shirts, camp sports bottle, and a camp bag, all included with registration.

Payment Information

Make checks payable to Jesuit Day Camp.

Early registration ends on Friday, May 25 at 4 p.m.

Any registrations received after that time will be charged a one-time late fee of \$50.

Printed registration forms and payment can be dropped off at the Jesuit switchboard (at the Banks Street entrance with the blue awning) or mailed to:

Jesuit Day Camp
Attn: Troy Baglio, Camp Coordinator
4133 Banks Street
New Orleans, LA 70119

Register Online

Submit your registration using this paper form or save time and register online using a debit/credit card.

Visit www.jesuitnola.org/SummerCamps for more information.

*Please keep this page for your records.
Do not return with your registration form.*

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2018 REGISTRATION FORM

Please complete **ONE** form for each individual camper. If you are registering more than one child, you may combine all registration fees and pay with one check, but you must complete a form for **EACH** individual camper. All fees must be **PAID IN FULL** to complete registration.

General Information *(please type or print)*

We require **all** information to complete your registration.

Camper's Name _____
First Last Nickname Age

Home Address _____
City State Zip

Parent/Guardian 1 _____ Day Phone _____ Evening Phone _____

Cell Phone _____ Email address _____

Parent/Guardian 2 _____ Day Phone _____ Evening Phone _____

Cell Phone _____ Email address _____

T-shirt size YS YM YL YXL
 AS AM AL AXL

How did you hear about Jesuit Summer Day Camp?

Other campers Jesuit's web site Email from Jesuit
 Relative or friend attends/attended Jesuit

Should we swim test your child?

Yes No ALL 5-6 year olds must take the swim test, regardless of swimming ability.

Advertisement in: _____
Newspaper or magazine name

Camp Registration

All prices include a \$50 non-refundable registration fee. Any registrations received after **May 25** will incur a one-time late fee of \$50. **Select from the following choices:**

SESSION 2	<input type="checkbox"/> June 25–July 13, 2018 Cost: \$410	WEEKLY	<i>Check the weeks your camper will attend:</i>
	Week 4: June 25–29 Week 6: July 9–13 Week 5: July 2–6		Cost: \$170/week per camper <input type="checkbox"/> Week 4: June 25–29 <input type="checkbox"/> Week 5: July 2–6 <input type="checkbox"/> Week 6: July 9–13

DISCOUNTS	No. of Campers 3 Weeks	EXTENDED CARE	Extended care is available from 7:30 a.m. - 8:30 a.m. and from 3:30 p.m. - 5:30 p.m. for \$5/hour, PAID DAILY.
	1 \$410 2 \$735 3 \$1,035 4 \$1,310		<input type="checkbox"/> I plan to send my camper to before care. <input type="checkbox"/> I plan to send my camper to after care.

Camper Groups Please list any campers your child requests to be grouped with (siblings, friends, etc.)

Emergency / Medical Information Please list your camper's medications or any medical issues.

Medical Insurance Coverage

Name of provider _____

Provider's Address _____

Policy Holder's Name _____

Policy/Group Number _____

Family Physician _____

Address _____ Phone Number _____

Vehicle Pick-Up Card

In regard to the pick-up of your child from Jesuit Day camp, no child will be allowed to enter any vehicle at the end of the camp day unless the Jesuit-authorized pick-up card given to the registering parent is displayed on the dashboard of the vehicle. Two (2) cards will be provided to each registering parent. The registering parent must list below any and all persons who are authorized to pick up the child from day camp when the person does not have a pick-up card on the vehicle or during the camp day. Jesuit will not release the child to any person other than those listed below.

Name(s) _____

Parental Consent

I grant permission for my child to participate in the Jesuit Summer Day Camp, including all off-campus field trips. I further understand the participant(s) officially enrolled in the camp will be insured by a commercial carrier contracted by Jesuit High School. If injured during camp activities, I will allow my child to be taken to the hospital for care. Camp administrators have my permission to dispense above listed medications.

Parent Signature _____

Date: _____

Photo Release

I grant permission for Jesuit High School of New Orleans (Jesuit) to photograph or film my child's name, image, likeness, spoken words, student work, and performance with or without associating names thereto and in any form (hereinafter collectively referred to as "Works"), and to use, publish, display, distribute, produce, duplicate, sell, and copyright these Works in connection with any promotional material that may be created by Jesuit High School. I waive any claim for compensation of any kind for the School's use or publication of the Works of my son.

I hereby release, discharge, and agree to hold harmless Jesuit and those acting under its authority from any liability to the extent provided by the law, for use or publication of the Works described above.

By signing below, I agree to the terms stated above.

Parent Signature _____

Date: _____