

Come Join Us!

Mrs. Braswell & Miss Abby's 2023 Summer Kick-Off

Looking for something to do with your children for the first weeks of summer? Join Mrs. Braswell and Miss Abby for an adventure filled week! Lunch is included for all campers. Please pack a daily snack and water bottle.

May 30th – June 2nd 8:30 am. - 3:00 pm. (NO AFTERCARE)

June 5th—June 9th 8:30 am. - 3:00 pm. (NO AFTERCARE)

*****IF YOU ARRIVE AT PICK UP AFTER 3:15p.m. YOU WILL BE CHARGED**

\$5/MINUTE FOR EACH CAMPER.

Prices:

\$225 per camper May 30th—June 2nd

\$280 per camper June 5th—June 9th

\$65 per day

Activities

- Games
- Sports
- Crafts
- Movie & Popcorn
- Obstacle Course
- Much More

For more information concerning camp and to sign up your child, email Mrs. Braswell mbraswell@sjsonline.org or 561-441-0554. Please make checks payable to Melissa Braswell (checks will not be cashed until May 22, or use Zelle (use 561-441-0554), or cash.

Space is limited; first come first served.



Mrs. Braswell and Ms. Abby's Summer Camp

Contact: mbraswell@sjsonline.org

Phone number for Mrs. Braswell: 561-441-0554

SUMMER CAMP 2023 APPLICATION

CAMPER'S INFORMATION

Name:	Date of Birth:	Age:
Current Address:		
City:	State:	Zip Code:
Medications:	School Attending:	

MOTHER'S INFORMATION

Name:	Employer Name:	
Address:	Work Phone:	
City:	State:	Zip Code:
Home Phone:	Cell Phone:	E-Mail:

FATHER'S INFORMATION

Name:	Employer Name:	
Address:	Work Phone:	
City:	State:	Zip Code:
Home Phone:	Cell Phone:	E-Mail:

EMERGENCY CONTACT

Name:	Relationship:	
Address:	Phone:	
City:	State:	Zip Code:

PEDIATRICIAN INFORMATION

Name:	Phone:	
Address:	Fax:	
City:	State:	Zip Code:

MEDICAL INSURANCE INFORMATION

Member Name:	Member ID:	Group Number:
Group Name:	Employee Name:	Relationship:
Insurance Company:	Customer Service Number:	

SUMMER CAMP 2023 APPLICATION

ALLERGIES OR SPECIAL MEDICAL CONCERNS

DISMISSAL RESPONSIBILITIES

Name:

Relationship:

Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Work Phone:

DISMISSAL REONSIBILITIES CONTINUED

Name:

Relationship:

Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Work Phone:

Relationship:

Address:

State:

Zip Code:

Cell Phone:

Work Phone:

CAMP REFUND POLICY

There are NO refunds for any reason, including but not limited to: summer school, sickness, separation anxiety, vacation, injury, or non-compliance with camp rules. Only for an extended absence (a full camp week) due to illness or family emergencies will a CREDIT applicable to future camp sessions be granted. Individual days missed during any week cannot be made up during later weeks. THERE WILL BE NO CASH REFUNDS. In the event the National Hurricane Center broadcasts a hurricane warning for South Florida, Saint Joseph's Episcopal School Summer Camp will cancel its program for the duration of the inclement weather. A 50% refund will be issued if Summer Camp is closed for more than three days.

 My initials to the left indicate I have read and agree to abide by the camp refund policy.

SUMMER CAMP 2023 APPLICATION

SIGNATURES

The undersigned hereby:

1. acknowledges that Camp fees are due and payable in full **prior to attendance**.
2. certifies that the Camper registered on this form is in good health and has no medical condition that would prohibit vigorous participation in the registered program(s).
3. agrees to be responsible for any loss, damage, or destruction by our Camper to any property of the Camp or to any property for which the Camp is liable or chargeable.
4. consents to the full participation of the Camper in the registered program(s), fully recognizing and accepting the inherent risks involved in such activities.
5. releases and holds harmless Saint Joseph's Episcopal School, its officers, employees, representatives, agents, successors, and assigns from all liability for any injury or damage to person or property, howsoever caused, resulting from participation by the aforementioned Camper in the program(s);
6. permits emergency medical treatment to be authorized in the event parents or guardian cannot be reached and accepts responsibility for the payment of such bills.
7. understands that Saint Joseph's Episcopal School Summer Camp may unilaterally dismiss a camper should it determine that the conduct of the Camper is not in the best interest of the Camp.
8. grants permission for the use of my Camper's photograph(s) in camp promotional publications.
9. **acknowledges that a late pick-up fee of \$5.00 per minute/per child after 3:15 p.m. will be charged to be paid by the end of camp.**

 Parent initials to the left indicate I have read and agree to abide by the camp policy.

Signature of Parent:

Date:

Signature of Parent:

Date:

SUMMER CAMP LUNCHES

MAY 30TH – JUNE 2ND

JUNE 5TH – JUNE 9TH

MENU

Child's Name:

- **Monday**
Spaghetti and Meatballs & fresh fruit (Buttered noodles upon request).
NOT AVAILABLE MAY 30th ONLY!
- **Tuesday**
Hotdog, chips, & fresh fruit
- **Wednesday**
Chicken nuggets, chips, & fresh fruit
- **Thursday**
Turkey/cheese sub, chips, & fresh fruit
- **Friday**
Pizza

You can substitute a meal if needed for peanut butter & jelly. Gluten free & vegan meals available upon request.