

Noah's Ark Learning Center



A ministry of Fishersville United Methodist Church
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<http://noahsarklearningcenter.org>

2023 Summer Camp Registration

2 ½ years to 5th grade

ENROLLMENT AGREEMENT

Noah's Ark Learning Center is offering a nine week summer camp program for students between two and a half years to ten years of age. Summer camp will be divided into age appropriate groups. Each themed session will include a balanced variety of indoor and outdoor games, arts and crafts, and water play each week. Please be aware this program is organized as an active camp experience, taught and guided by trained NALC staff. Children will spend a good portion of time outside and will get wet and dirty many days. Appropriate clothing and footwear are essential. PLEASE LABEL ALL YOUR CHILDREN'S THINGS.

Parents are responsible for the following:

- * Providing a nutritious lunch for their child(ren) daily (school day and full day students)
- * Providing 1-2 nutritious snacks for their child(ren) daily in a separate bag or container (one for morning and one for afternoon)
- * Daily transportation to and from camp
- * A resting mat for ages 2 ½ to 5 (if staying past 11:45am) & light blanket for rest time
- * At least 1 change of weather appropriate clothing to be kept at school
- * Extra pair of footwear that can get wet
- * Bathing suit (as communicated by teacher)
- * Towel

****NOTE:** Please consider carefully the weeks/schedule for which your child is registered. **Your signature requires all tuition to be paid as scheduled/registered. Schedule changes after May 1st will not reduce tuition amounts owed.**

In signing below, parent(s) authorize Noah's Ark Learning Center and its staff to administer medical care in the event of an emergency. Children with recurrent vomiting, diarrhea, or a fever of 100° or higher will not be permitted to attend camp and parent(s) understand they must come promptly to pick up their child if notified that their child is sick or injured. If a child requires an epipen or other emergency medication, parents understand they must provide the appropriate medication authorization form signed by both the parent and the child's physician (forms available in the office). Parent(s) agree not to hold Noah's Ark Learning Center or any of their employees responsible in case of an accident or incident involving their child. Noah's Ark Learning Center does not discriminate in its enrollment or hiring practices in regard to race, religion, gender, or nationality. The school is Christian and its policy encourages diversity and internationalism as well as social and ecological awareness and stewardship.

The parent(s)/guardians authorize Noah's Ark Learning Center and its staff to obtain immediate medical care if any emergency occurs when the parent(s)/guardians cannot be located immediately.

By signing below I agree to the above terms and conditions:

Parent / Guardian Signature

Date

Noah's Ark Learning Center Director

Date

Nickname: _____

Date of Birth: _____

Age at time of enrollment: _____ yrs. /mo. Sex: M or F
Grade just completed, if applicable _____

Mother

Father

Name: _____
Address: _____
Cell Phone: _____
Email: _____
Employer: _____
Occupation: _____
Work Phone: _____

Maternal Grandparents

Paternal Grandparents

Name: _____
What your child calls them: _____
Address: _____
Phone: _____
Email: _____

Sibling Names and Ages: _____

Names of Others Living with Child: _____

Relationship to Child _____

Household Pets and their names: _____

EMERGENCY CONTACTS

The following individuals are permitted to pick-up the child and should be contacted if the parent(s) are unavailable (in addition to parents and grandparents listed above):

1. Name: _____
Relationship to child: _____
Address: _____

Phone 1: _____
Phone 2: _____

2. Name: _____
Relationship to child: _____
Address: _____

Phone 1: _____
Phone 2: _____

Persons not permitted to pick up your Child

- Appropriate paperwork such as custody papers shall be attached if a parent is not allowed to pick up the child.
- NOTE: Section 22.1-4.3 of the *Code of Virginia* states that unless a court order has been issued to the contrary, the noncustodial parent of a student enrolled in a public school or day care center must be included, upon the request of such noncustodial parent, as an emergency contact for events occurring during school or day care activities.

Health Conditions the school needs to be aware of: _____

Known Allergies: _____

Life - threatening? Yes _____ No _____ Epipen prescribed by physician? Yes _____ No _____

Precautions: _____

Dietary Restrictions: _____

Special Needs: _____

Child's Physician: _____ Phone: _____ City/State: _____

SUMMER CAMP FEES

Campers can come for as little as one week or can join us for the entire summer!

Monthly tuition payments may be made if attending a **full calendar month**.

MONTHLY camp tuition is due on the 1st of each month.

WEEKLY camp tuition is due the Monday prior to attending.

Tuition and Registration **MUST BE PAID BEFORE** the camper attends.

_____ I choose to pay monthly

_____ I choose to pay weekly

****Please indicate the program your child will attend and circle days if 3 day program.**

X			2023 Summer Camp Programs	Times	Fee per Month	Fee per Week	Fee Per Day (add-on)
			TWO YEAR OLDS				
	MTuW	WThF	<i>3 Days Early Drop Off</i>	7:00am-8:45am	\$109	\$65	\$30
	MTuW	WThF	3 Half Days MTW or WThF	8:45am-11:45am	\$286	\$134	\$40
	MTuW	WThF	3 School Days MTW or WThF	8:45am-3:00pm	\$447	\$164	\$50
	MTuW	WThF	3 Full Days MTW or WThF	7:00am-5:30pm	\$589	\$223	\$60
			<i>5 Days Early Drop Off</i>	7:00am-8:45am	\$152	\$76	
			5 Half Days	8:45am-11:45am	\$353	\$151	
			5 School Days	8:45am-3:00pm	\$616	\$207	
			5 Full Days	7:00am-5:30pm	\$763	\$251	
			THREE YEARS TO 5TH GRADE				
	MTuW	WThF	<i>3 Days Early Drop Off</i>	7:00am-8:45am	\$103	\$60	\$25
	MTuW	WThF	3 Half Days MTW or WThF	8:45am-11:45am	\$280	\$140	\$35
	MTuW	WThF	3 School Days MTW or WThF	8:45am-3:00pm	\$436	\$142	\$45
	MTuW	WThF	3 Full Days MTW or WThF	7:00am-5:30pm	\$578	\$207	\$55
			<i>5 Days Early Drop Off</i>	7:00am-8:45am	\$147	\$71	
			5 Half Days	8:45am-11:45am	\$336	\$146	
			5 School Days	8:45am-3:00pm	\$572	\$196	
			5 Full Days	7:00am-5:30pm	\$736	\$234	
			ALL PROGRAMS				
			Registration Fee per Week	\$20	Weekly		
			Registration Fee for all of Summer Camp	\$85	One time		
			Late payment fee, late pickup fee, returned check fee	\$25	Per occurrence		
			Non-potty trained >= 3 year old Fee	\$10	Monthly		
			Multiple child discount applied to 2 nd and more child(ren)	5%	Ongoing		

CAMP SCHEDULE

Please indicate which week(s) your child will be attending.

X	Dates	Week	Title
	May 30-June 2	1	"Music, Movement, Mindfulness"
	June 5-9	2	"A Bug's Life"
	June 12-16	3	"Out of this World"
	June 19-23	4	"Dinosaur Days"
	June 26-30	5	"Storybook Summer"
****	July 3,4		No Camp
	July 5-7	6	"Stars and Stripes"
	July 10-14	7	"Christmas in July"
	July 17-21	8	"Pixie Dust and Treasure"
	July 24-28	9	"Aloha from Hawaii"

**Field trips and visitors are planned for the summer weeks. Any of these activities may require an additional fee (cost would be <= \$10 per child per week). Fees would include but not be limited to transportation, admission, or presentation. Families will be informed well in advance if extra fee is required.

PERMISSIONS:

Picture Publishing Consent Agreement

I give permission for my child's photo to be used on the Noah's Ark Learning Center and Fishersville United Methodist Church websites. I understand that the pictures will not be identified with names. Yes No

I give permission for my child's photo to be used on the Noah's Ark Learning Center Facebook Parent Page (a closed page). I understand that the pictures will not be identified with names. Yes No

Field Trip Consent Agreement

My child has permission to participate in walks and field trips away unless the school receives written notice from me. Yes No

My child has permission to be transported in a van or bus by a licensed and insured driver. I will provide a car seat for my child. Yes No

Sunscreen

The camp has my permission to apply sunscreen to my child and I will provide sunscreen LABELED with my child's name. Are there any noted reactions _____

Parent Signature _____ Date _____

For Parents of children who are 5 and younger, please put an X by one of the two statements below:

My child **IS** potty trained _____

My child **IS NOT** potty trained _____

Please be sure the following items have been included for registration:

Registration fee

Immunization record

Completed registration/enrollment form

Birth certificate

Discipline policy

Enrollment Agreements**School Policies Agreements**

Please Initial	
	I have read the Parent Handbook. I understand the practices, policies, and procedures of the school and I agree to abide by them.
	I understand the Noah's Ark Learning Center drop-off and pick-up procedures and agree to follow them.

Financial Agreements

Please Initial	
	I agree to pay the tuition to Noah's Ark Learning Center to reserve a position for my child. All tuition and fees will be paid in accordance with the payment schedules and procedures established by the school.
	I understand that I have the obligation to pay all charges for the full Summer unless special mutually agreed upon arrangements are made with the school.

Virginia Regulation Agreements

Please Initial	
	Noah's Ark Learning Center agrees to notify the parent(s)/guardian(s) whenever the child becomes ill and the parent(s)/guardian(s) will arrange to have the child picked up as soon as possible if so requested by the center.
	The parent(s)/guardian(s) authorize Noah's Ark Learning Center to obtain immediate medical care if any emergency occurs when the parent(s)/guardian(s) cannot be located immediately. **
	The parent(s)/guardians agree to inform the center within 24 hours or the next business day after his child or any member of the immediate household has developed a reportable communicable disease, as defined by the State Board of Health, except for life threatening diseases which must be reported immediately.
	I agree to complete and submit all necessary enrollment forms to Noah's Ark Learning Center. I understand that if these forms are not on record at least two weeks before my child's first day of school, his/her enrollment will be jeopardized. I will update all information as necessary.

Parent Signature(s)	Date

*** If there is an objection to seeking emergency medical care, a statement should be obtained from the parent(s) or guardian(s) that states the objection and the reason for the objection.*