

## EMERGENCY FORM

**INSTRUCTIONS TO PARENTS:**

- (1) Complete all items on this side of the form. Sign and date where indicated.
- (2) If your child has a medical condition which might require emergency medical care, complete the back side of the form. If necessary, have your child's health practitioner review that information.

NOTE: THIS ENTIRE FORM MUST BE UPDATED ANNUALLY.

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
Last First

Enrollment Date \_\_\_\_\_ Hours & Days of Expected Attendance \_\_\_\_\_

Child's Home Address \_\_\_\_\_  
Street/Apt. # City State Zip Code

Parent/Guardian Name(s)	Relationship	Phone Number(s)		
Email: _____		Place of Employment: _____	C: _____	H: _____
		W: _____		
Email: _____		Place of Employment: _____	C: _____	H: _____
		W: _____		

Name of Person Authorized to Pick up Child (*daily*) \_\_\_\_\_  
Last First Relationship to Child

Address \_\_\_\_\_  
Street/Apt. # City State Zip Code

Any Changes/Additional Information \_\_\_\_\_

**ANNUAL UPDATES** \_\_\_\_\_  
(Initials/Date) (Initials/Date) (Initials/Date) (Initials/Date)

When parents/guardians cannot be reached, list at least one person who may be contacted to pick up the child in an emergency:

1. Name \_\_\_\_\_ Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_  
Last First

Address \_\_\_\_\_  
Street/Apt. # City State Zip Code

2. Name \_\_\_\_\_ Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_  
Last First

Address \_\_\_\_\_  
Street/Apt. # City State Zip Code

3. Name \_\_\_\_\_ Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_  
Last First

Address \_\_\_\_\_  
Street/Apt. # City State Zip Code

Child's Physician or Source of Health Care \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_  
Street/Apt. # City State Zip Code

In EMERGENCIES requiring immediate medical attention, your child will be taken to the NEAREST HOSPITAL EMERGENCY ROOM. Your signature authorizes the responsible person at the child care facility to have your child transported to that hospital.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**INSTRUCTIONS TO PARENT/GUARDIAN:**

- (1) Complete the following items, as appropriate, if your child has a condition(s) which might require emergency medical care.
- (2) If necessary, have your child's health practitioner review the information you provide below and sign and date where indicated.

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Medical Condition(s): \_\_\_\_\_

Medications currently being taken by your child: \_\_\_\_\_

Date of your child's last tetanus shot: \_\_\_\_\_

Allergies/Reactions: \_\_\_\_\_

**EMERGENCY MEDICAL INSTRUCTIONS:**

(1) Signs/symptoms to look for: \_\_\_\_\_

(2) If signs/symptoms appear, do this: \_\_\_\_\_

(3) To prevent incidents: \_\_\_\_\_

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OTHER SPECIAL MEDICAL PROCEDURES THAT MAY BE NEEDED: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

**Note to Health Practitioner:**

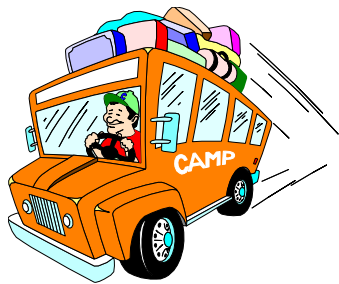
If you have reviewed the above information, please complete the following:

\_\_\_\_\_  
Name of Health Practitioner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Health Practitioner

(\_\_\_\_\_)\_\_\_\_\_  
Telephone Number



# CAMP LELA MD

Child's Name: \_\_\_\_\_

AGE: \_\_\_\_\_

Session 1 \$585.00     Session 2 \$780.00     Session 3 \$975.00     All Sessions

**Session 1**  
 Week 1: 6/11-15  
 Week 2: 6/18-22  
 Week 3: 6/25-29

**Session 2**  
 Week 4: 7/2-6  
 Week 5: 7/9-13  
 Week 6: 7/16-20  
 Week 7: 7/23-27

**Session 3**  
 Week 8: 7/30-8/3  
 Week 9: 8/6-10  
 Week 10: 8/13-17  
 Week 11: 8/20-24

**All Sessions**  
 Extended Care  
(no charge)

The full tuition cost for summer camp is \$2310.00. All campers are required to bring a daily brown-bagged lunch along with an afternoon snack and a beverage. There will be an \$8 lunch fee charge for children who arrive without a lunch. Please do not pack candy, gum, soda, other sugary items, red dye, and ABSOLUTELY NO PEANUT PRODUCTS. **Payments will be accepted via cash, credit card or Tuition Express only. Personal checks are not accepted.** Payment options are available as follows:

Please Check:

- Weekly \$195.00
- Bi-weekly (due as billed) or Semi-Monthly (due on the 1<sup>st</sup> & 15<sup>th</sup>) \$390.00
- Session (due by the 1<sup>st</sup> day of session)
- Payment in full for all sessions \$2310.00
- Extended care (No charge) (6:30-8:00 a.m. / 4:00-6:00 p.m.)

**Please Note: A late pick-up fee of \$2.00 per minute will be charged for any child picked up after 6pm. Late fee's will not apply if a field trip returns late, however, if your child is not enrolled in extended care, you are expected to pick your child up upon return.**

Your signature below states that you agree to abide by the tuition policy and associated fees, as applicable.

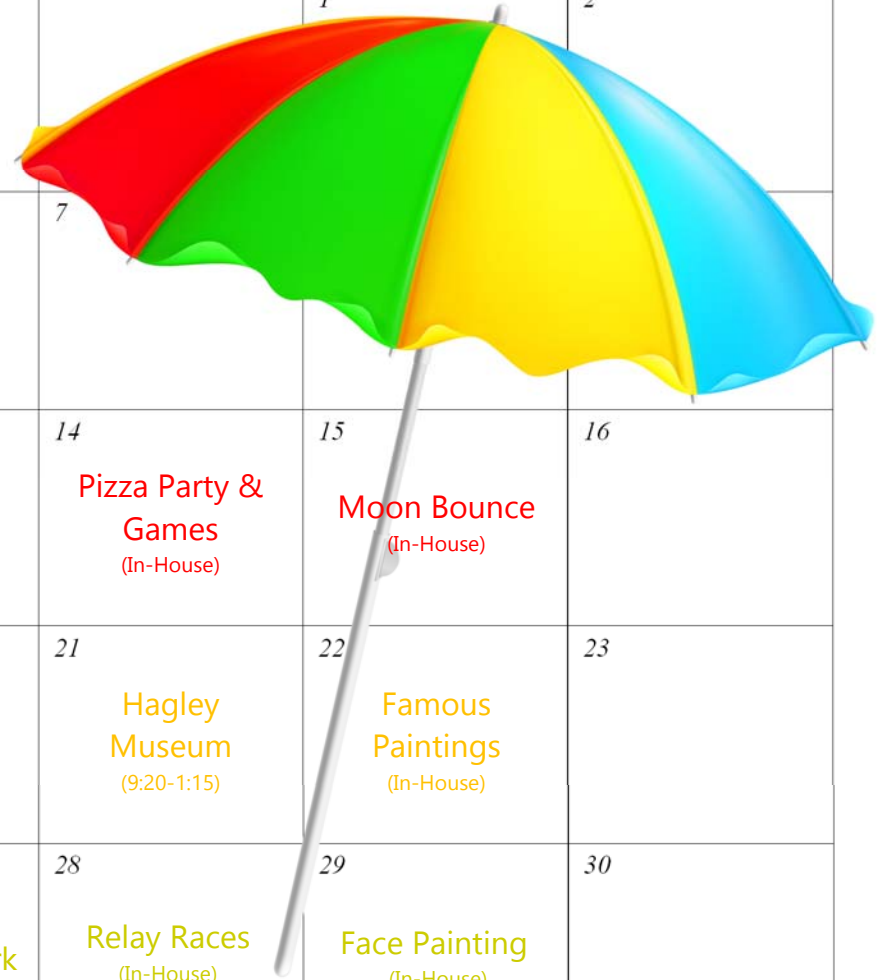
\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



# JUNE 2018

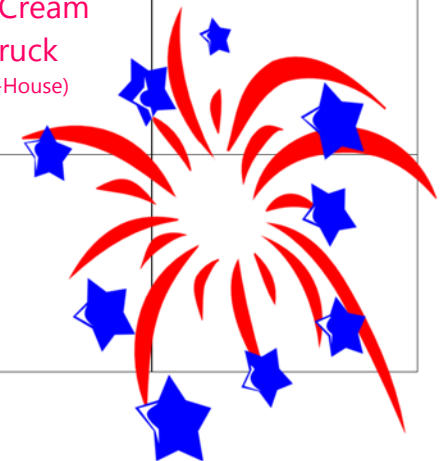
Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2
3	4	5	6	7		
10	11	12	13	14	15	16
<b>It's Summer Time!</b>	1st Day of Camp (In-House)	Getting Acquainted (In-House)	Welcome & Rules (In-House)	Pizza Party & Games (In-House)	Moon Bounce (In-House)	
17	18	19	20	21	22	23
<b>Creative Artist</b>	Ice Cream Truck (In-House)	John Dickinson Plantation (8:55-2:00)	Fort Delaware (10:15-3:30)	Hagley Museum (9:20-1:15)	Famous Paintings (In-House)	
24	25	26	27	28	29	30
<b>Moving Right Along</b>	Christiana Skating Rink (9:40-12:30)	Team Building (In-House)	Launch Trampoline Park (9:40-2:00)	Relay Races (In-House)	Face Painting (In-House)	





# JULY 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1 <b>Let the Adventures Begin</b>	2 Minute to Win It (In-House)	3 Maryland Science Center (9:20-2:00)	4 Center Closed	5 Franklin Institute (8:40-3:10)	6 US Mint (8:35-12:45)	7
8 <b>Wet -N- Wild</b>	9 Slip & Slide (In-House)	10 Water Slide (In-House)	11 Tie Dye Shirts (In-House)	12 Lums Pond Picnic (9:00-1:30)	13 Plumpton Park Zoo (9:50-2:10)	14
15 <b>MVP Week</b>	16 Sports Tournament (In-House)	17 Fun Plex (9:15-4:15)	18 Get Fit (In-House)	19 Laser Dome (9:-215)	20 Karate (In-House)	21
22 <b>Under the Sea</b>	23 Key Chain Creations (In-House)	24 Camden Aquarium (9:05-3:40)	25 Lums Pond Picnic (9:00-1:30)	26 Delaware Rock Gym (TBD)	27 Ice Cream Truck (In-House)	28
29 <b>Tasty Treats</b>	30 Little Chefs (In-House)	31 Painting w/a Twist (In-House)				





# AUGUST 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
<b>Tasty Treats Continued</b>			1 Creation Station (In-House)	2 Ice Cream Party (In-House)	3 Water Games (In-House)	4
5 <b>Play-Offs</b>	6 Garden State Discovery Museum (9:45-2:50)	7 Bowling (11:50-3:05)	8 LELA Olympics (In-House)	9 Mini Golf (8:50-1:35)	10 Maize Quest (8:45-3:15)	11
12 <b>Grand Finale</b>	13 Barnyard Kingdom (8:40-2:15)	14 Crayola Factory (8:00-3:35)	15 Family BBQ (In-House)	16 Dutch Wonderland (TBD)	17 Movie & Popcorn (In-House)	18
19 <b>It's a Wrap</b>	20 Center Closed	21 Water Slide (In-House)	22 Talent Show (In-House)	23 Dance Party/ Sock Hop (In-House)	24 Moon Bounce (In-House)	25
26 <b>Back to School</b>	27 Pizza Party (In-House)	28 Show Business (In-House)	29 Movie & Popcorn (In-House)	30 Friendship Chain (In-House)	31 Farewell	

