



# Summer Camp 2022

Welcome to Cornerstone Christian School's Summer Camp. The Summer Staff and I are excited for all this summer has to bring. Our summer program is perfect for kids entering K through 7<sup>th</sup> grade. We have tons of great activities planned that will encourage your child to use their imagination, build friendships, and have a lot of fun. Thank you for choosing Cornerstone. We look forward to building a lasting relationship with your family.

Coach Tammy Smith  
 Summer Camp Director  
 summercamp@ccswildomar.com

Camp Dates	Tuition Due Dates
Week 1 June 20 - 24	June 16
Week 2 June 27 – July 1	June 23
Week 3 July 5 – 8 (*closed on July 4)	June 30
Week 4 July 11 - 15	July 7
Week 5 July 18 - 22	July 14
Week 6 July 25 - 29	July 21

Fees and Tuition Rates		
<b>Registration Fee</b> <i>Deadline Tuesday, May 31<sup>h</sup></i>	\$40 per child, enrolled CCS students for 2022 - 2023 school year \$60 per child, non CCS students	
<b>Late Registration Fee</b> <i>Starts Wednesday, June 1<sup>st</sup></i>	\$50 per child, enrolled CCS students \$70 per child, non CCS students	This fee also applies to "drop-ins" (space available). Students must have registration form on file.
<b>Tuition Rates</b> *Tuition is due by 6pm the Thursday of the prior week.	FULL DAY: \$60 a day, per child, 7am – 5:30pm <b>OR</b> \$275 per week (a \$25 savings) *On Site Field trip costs are in addition to tuition	PARTIAL DAY: \$50 a day, per child, 9am - 3pm *Field trip costs are in addition to tuition
<b>**All Fees are NON-Refundable**</b>		



## SUMMER CAMP 2022

### POLICIES AND PROCEDURES

Please Initial next to each section:

#### \_\_\_\_\_ REGISTRATION FEE

A non-refundable registration fee is required each year. This includes "drop-ins". A registration form must be on file for all students.

#### \_\_\_\_\_ TUITION PAYMENT POLICY

Tuition payments are due **prior** to the actual week of attendance. Please see tuition due date schedule.

**Children will not be admitted without payment.** All payments are to be made online at [www.ccswildomar.com](http://www.ccswildomar.com), Online Payments.

#### \_\_\_\_\_ LATE FEE

A \$1.50 late fee will be charged for each minute after 5:30pm (a minimum charge of \$15.00 per day/per child). **Late fees must be paid at time of pick up.**

#### \_\_\_\_\_ HOURS OF OPERATION

CCS Summer Camp is open Monday – Friday, 7 am - 5 pm. Camp begins June 20, 2022 through July 29, 2022 (Summer Camp is closed on Monday, July 4).

#### \_\_\_\_\_ REFUNDS

Staff are scheduled according to number of students registered; therefore, **there are no refunds due to absences.**

#### \_\_\_\_\_ SCHEDULE CHANGE POLICY **\*\*IMPORTANT\*\***

If you find that you need to make a change to your child's original weekly schedule, you **MUST** email administration at [summercamp@ccs-w.org](mailto:summercamp@ccs-w.org) by Thursday prior to attendance. While there are no refunds, schedule changes may be considered and granted at the discretion of administration. All changes must be emailed and acknowledged by the Camp Admin.

#### \_\_\_\_\_ SICKNESS

Children who have a fever, runny nose, cough, or is vomiting, or any other symptoms will not be permitted to attend camp. Children must be symptom free, with no medication, for 24 hours before returning to summer camp.

#### \_\_\_\_\_ SIGN-IN / SIGN-OUT

**\*\*MANDATORY\*\* All students must be checked in and out of Summer Camp by an adult (18+).** If someone other than yourself will be picking up your child, they must be on the emergency pick up list and have identification. To make last-minute pick-up arrangements for someone not on your child's emergency sheet, email Camp Admin at [summercamp@ccs-w.org](mailto:summercamp@ccs-w.org).

#### \_\_\_\_\_ BULLY FREE ZONE

Your child's well-being is very important to the Summer Camp staff. There is zero tolerance for bullying at CCS. Children who are caught bullying other campers may be asked to not return to CCS Summer Camp.

#### \_\_\_\_\_ ROTATIONS

A variety of age appropriate curriculum will be taught by our qualified staff and will include educational and creative opportunities. Students will be split into age appropriate groups (only during the group rotations).

#### \_\_\_\_\_ ELECTRONIC POLICY

K - 7<sup>th</sup> grade students are allowed to use electronic devices only during approved times that Summer Camp Staff sets forth. CCS and Staff are not liable for any damage, lost, or stolen electronic devices that a student may bring. Parents and students that knowingly bring such devices are doing so at their own risk. In addition, all games must be school appropriate.

#### \_\_\_\_\_ On-Site FIELD TRIPS

We will occasionally offer on-site field trips and the cost will range from \$0-\$25.00. All field trip fees are added to the appropriate camp days.

#### \_\_\_\_\_ MEDICATION

In order to administer medication, parents must fill out and sign a medication form and bring all medications in original packaging, clearly labeled to the school office.

#### \_\_\_\_\_ DRESS CODE

Students must wear appropriate summer attire; shorts/jeans, tank tops/t-shirts, and sandals/shoes. Flip Flops and spaghetti straps are not allowed. Modesty is a MUST. Some days require swim wear and a t-shirt must be worn in addition to a bathing suit. Each student is required to have an extra set of clothes on site.

#### \_\_\_\_\_ SNACK / LUNCH

Each student must bring a snack and lunch every day. A microwave is available. Summer Camp staff will provide an afternoon snack.



# SUMMER CAMP 2022 Emergency Card

<b>Student Last Name:</b>	<b>First Name:</b>	
<b>DOB:</b>	<b>Entering Grade:</b>	
<b>Home Address:</b>	<b>City:</b>	<b>Zip code:</b>
<b>Mother's Name:</b>	<b>Father's Name:</b>	
<b>Cell #:</b>	<b>Cell #:</b>	
<b>Work Phone #:</b>	<b>Work Phone #:</b>	
<b>Email:</b>	<b>Email:</b>	

## Emergency Contacts

Please give name, relationship and phone number of persons other than parents to have your child picked up if he/she becomes ill at Summer Camp and parents cannot be reached. **Students will only be released to those persons listed below.**

Please notify the Staff whenever this information changes.

#	Name	Relationship	Phone #
1			
2			
3			
4			

**Medical Information:** Please place a check in the box(es) that apply to your child.

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> <b>NO KNOWN HEALTH PROBLEMS</b> | <input type="checkbox"/> Blood Disorder   | <input type="checkbox"/> Hearing Aid Used               | <input type="checkbox"/> Speech Problem      |
| <input type="checkbox"/> Allergy-Pollen/Dust/hay fever   | <input type="checkbox"/> Cancer/ Leukemia | <input type="checkbox"/> Hemophilia                     | <input type="checkbox"/> Glasses/Contacts    |
| <input type="checkbox"/> Allergy-Food (List)             | <input type="checkbox"/> Cerebral Palsy   | <input type="checkbox"/> ADD/ADHD                       | <input type="checkbox"/> Allergy-Bee Sting   |
| <input type="checkbox"/> Allergy-Medication (List)       | <input type="checkbox"/> Color Blindness  | <input type="checkbox"/> Epilepsy/Seizures              | <input type="checkbox"/> Others (list below) |
| <input type="checkbox"/> Asthma- (no medication needed)  | <input type="checkbox"/> Diabetic         | <input type="checkbox"/> Hearing Loss (which ear _____) |  |
| <input type="checkbox"/> Asthma- (medication needed)     |   |   |  |

**Are there any physical conditions, which need special consideration in the event of an emergency?**

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**IMPORTANT: ALL MEDICATIONS DISPENSED AT SCHOOL MUST BE IN ITS ORIGINAL CONTAINER.**

CCS staff does not dispense any type of medication (prescription & non-prescription) to students unless brought in by the parent, in its original container, and a consent form is signed.

**Medical Insurance Carrier:**

**Policy:**

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**Dear Parent/Guardian:** Your signature below authorizes CCS to render the necessary emergency treatment for serious injury or accident (at your expense) if neither parent/guardian can be reached. In the event of an emergency, your child will be taken to the nearest hospital or emergency room.

**Signature of Parent/Guardian**

**Date**

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## SUMMER CAMP 2022 Parent Release and Media Waiver

### PARENT OR GUARDIAN RELEASE

The undersigned Parent/Guardian (hereinafter, "I") understands that the students will be supervised while participating during scheduled times. Summer Camp will have live-scanned adults in the presence of the children.

I, hereby, agree to release Cornerstone Community Church (CCC) and Cornerstone Christian School (CCS) and its agents, employees, volunteers, or members harmless from all actions, claims, liability, and expenses, whether known or unknown, present or future relating to or arising from or connected in any manner with the student's participating during Summer Camp herein. I read, understand, and agree to the Policy and Procedures set forth by Cornerstone Christian School Summer Camp.

This form must be signed and turned in along with all Summer Camp Forms no later than the first day of attendance. No child will be permitted to be dropped off unless this form has been signed and turned in to CCS.

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Last name (child)

First name (child)

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Signature of Parent/Guardian

Date

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### MEDIA RELEASE:

Cornerstone Christian School highlights positive news, events and programs in publications such as newsletters, on our website, on social media, with press releases and occasionally in video productions. Our Media/Photo release form allows you to withhold consent for the release of your child's photo or likeness in publications or productions such as those listed. This includes: Newsletters Video productions Websites Social Media Press releases The Media release form DOES NOT govern publication of a student's name or photo: a) in site specific publications, such as a Yearbook (video or print), School Activity Program or School Athletic Program or b) by the news media The news media is protected by California Civil Code Section 3344 (subsection d), which states that "use of a photograph or likeness in connection with any news, public affairs or sports broadcast ...shall not constitute a use for which consent is required." Therefore, if you do not want your child talking to a member of the press, we suggest you instruct him/her not to comment if approached by a media representative.

Please check a box below:

- I GIVE PERMISSION for my child's photograph or image to be used by Cornerstone Christian School and/or those acting under its permission and on its authority.
  
- I DO NOT GIVE PERMISSION for my child's photograph or image to be used by Cornerstone Christian School and/or those acting under its permission and on its authority.

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Last name (child)

First name (child)

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Signature of Parent/Guardian

Date



## SUMMER CAMP 2022

Week 1

June 20-24

Pirate Week "Ahoy Matey "

Science experiment: water wonder

Am activities: manipulatives table time

Morning start up

AM snack – student bring from home

Worship, Devotion, Bible lesson

Math & Spelling fun activities

Art time: themed art project

Lunch time / manipulatives, table time

Library time: check out books, AR reading

Group Activity: card & board games, surprise adventure

Afternoon snack – provided by CCS

Summer Camp Journaling

Gym time: indoor P.E. activities

Relax & movie time at 4:30 pm / parent pick up





## Summer Camp 2022 Daily / Weekly Registration

Student Name: \_\_\_\_\_

Grade in August, 2022: \_\_\_\_\_

\*\* Please mark what days your student will attend Summer Camp, using **F = Full day; 7a-5:30p** \*\*or\*\* **P = Part time; 9a – 3p.**

\*\* Please drop this form by the office or email to [summercamp@ccswildomar.com](mailto:summercamp@ccswildomar.com).  
Any changes need to be emailed by the Thurs. prior.

Camp Dates	Monday	Tuesday	Wed.	Thursday	Friday	Tuition Due Dates	Office use Only
							Date Paid
Week 1 June 20 – 24						Thursday June 16	
Week 2 June 27 – July 1						Thursday June 23	
Week 3 July 5 – 8	Closed for July 4 <sup>th</sup> Holiday					Thursday June 30	
Week 4 July 11 - 15						Thursday July 7	
Week 5 July 18 - 22						Thursday July 14	
Week 6 July 25 - 29						Thursday July 21	