

PICK-UP AUTHORIZATION

Name _____ Ph# _____ Relationship _____
Name _____ Ph# _____ Relationship _____
Name _____ Ph# _____ Relationship _____
Name _____ Ph# _____ Relationship _____

Child's Doctor _____ Phone # _____

Hospital Preference _____

Does your child have any medical conditions (allergies, asthma, etc.) that we should know about? _____

Emergency Contact Name & Phone # _____

Field Trip Permission Form / Medical Authorization

***Field trips are only for those students going into Kindergarten through 8th grade; medical authorization is required for each student in summer day camp.*

My child has my permission to accompany First Baptist Brandon Christian Academy on all summer field trips, and I absolve the school from liability to me or my child in case of accident or injury to my child at camp or during any Summer Camp outing. I understand representatives of the school will properly chaperone the children and the children will be transported by bus. Also, by signing below, I authorize the school's staff to contact my child's physician and/or arrange for immediate medical emergency treatment. I authorize the physician/medical facility to administer emergency medical treatment as necessary to ensure the health/safety of my child. I agree to accept financial responsibility for medical services rendered. I accept financial responsibility for all camp fees and payments.

Parent's Signature _____

COUNTY OF HILLSBOROUGH STATE OF FLORIDA
Signed before me this _____ day of _____, 2018

Notary _____

Commission Expires (Stamp) _____

_____ Personally known to me

_____ Identification shown

Type of ID _____



Summer Day Camp 2018

Infant thru 8th Grade May 28—August 3, 2018

216 North Parsons Ave.
Brandon, FL 33510
(813) 685-9435
www.fcbbrandon.org/academy

The mission of FBBCA Summer Day Camp is to provide quality care in a Christ-centered environment. Summer Day Camp is exclusively for the students of FBBCA. The student will be placed in the age group or grade level just completed at the Academy. Students will enjoy many activities including crafts, music, play time, theme days, and more.

DATE:

May 28—August 3, 2018 **(Closed July 2-6)**

TIME:

7:00 AM—5:30 PM

REGISTRATION:

\$25 Due May 15, 2018, **and is non-refundable**

PAYMENT SCHEDULE:

<u>Weekly</u>	<u>Full Time (20 hrs or more)</u>	<u>Part Time (less than 20 hrs)</u>
Babies	\$150	\$105
One's/Two's	\$140	\$95
Three's/Four's	\$130	\$90
Elementary/Middle	\$120	\$80

Drop-in

Babies-Two's	\$45 per day
Three's-Middle	\$35 per day

****Please note: Monthly tuition payments begin August 1, 2018, and does NOT cover the one (1) week of Summer Camp in August. Parents are required to pay weekly for summer care until the week of August 3.**

The Summer Camp weekly payment must be paid the **Friday before the new week, or Monday of that week.** Drop-in fees must be paid at pick up. The fees are based on the age group or grade level **recently completed** by your child at the Academy. Failure to pay in a timely manner could result in dismissal of summer camp.

FIELD TRIPS:

Children going into kindergarten through 8th grade will take weekly field trips, excluding the week of VBS, June 18-22, 2018. These activities are voluntary and there will be an additional charge if students choose to participate.

ADDITIONAL INFORMATION:

For more information on activities, lunch, and special events during Summer Day Camp, go to www.fbcbrandon.org/Academy.

REGISTRATION FORM

Student Name _____ (full name used in school)

Grade Completed in 2018 _____ Student Date of Birth _____

Student Address _____

Primary Email _____

Father's Name _____

Address (if different from student) _____

Employer _____ Home Phone # _____

Daytime Phone # _____ Cell Phone # _____

Mother's Name _____

Address (if different from student) _____

Employer _____ Home Phone # _____

Daytime Phone # _____ Cell Phone # _____

Who has legal custody of the child being registered? _____

If only one parent has custody, a copy of the appropriate documents must be furnished and on file at the school.

Who is responsible for Summer Camp tuition payment? _____

How often do you plan to use summer care? (circle one)

Full Time Part Time Drop In

Circle the weeks you plan to attend.

May 28-June 1	June 25-June 29
June 4-June 8	July 9-July 13
June 11-June 15	July 16-July 20
June 18-June 22	July 23-July 27
July 30-August 3	

**SUMMER CAMP WILL BE CLOSED
JULY 2-6, 2018**