



**The registration fee and tuition cover the regular camp program, activities, field trips, arts and crafts, and a camp t-shirt. There is a multiple child discount – first child \$175.00 and each additional sibling \$160.00.**

**AGE REQUIREMENT:** Students in grades K-3 through 6<sup>th</sup> at the end of the 2009-2010 school year are allowed to attend. Campers are required to have attained the age of 3-1/2 years old at the time of attendance.

**HOURS OF OPERATION:** The camp day is from 6:45 AM to 5:30 PM. Arrival time runs from 6:45 AM to 8:00 AM. The daily schedule of camp activities begins at 8:00 AM and continues to 4:30 PM. At 4:30 PM all campers prepare to leave camp. Dismissal time runs from 4:30 PM to 5:30 PM. Families are charged a \$2.50 per minute late fee after 5:30 PM. Camp is closed on July 5, 2010.

#### **SESSIONS 1 – 8 – June 21 – August 20, 2010:**

Week 1: 6/21 – 6/25	Week 2: 6/28 – 7/2	Week 3: 7/5 – 7/9*
Week 4: 7/12 – 7/16	Week 5: 7/19 – 7/23	Week 6: 7/26 – 7/30
Week 7: 8/2 – 8/6	Week 8: 8/9 – 8/13	Week 9: 8/16 – 8/20

**ENROLLMENT PROCEDURE:** To enroll a Camper Application must be submitted either in person or by mail with the appropriate registration fee. Woodstream accepts cash, checks, and money orders. If a camper is enrolling for more than one session, indicate the weeks chosen by checking off the corresponding boxes on the Camper Application. Before a camper begins camp, the camp must also receive and accept a Health History, Examination and Emergency Information form. This form is automatically sent to camp families once a camper has been accepted provisionally.

**CONFIRMATION OF ENROLLMENT:** A mailing will be sent to you prior to the camp start date. The mailing includes: 1) a counter-signed copy of the Enrollment Agreement provisionally accepting your child, 2) a Health History, Examination and Emergency Information Form, 3) an Authorization to Administer Medication Form, 4) a Field Trip Permission Form, 5) a Permission to Transport Form, 6) and a packet of helpful information. An Authorization to Administer Medication Form is required if the camp medical attendant is to administer medication.

**AVAILABILITY:** Pre-Grammar Camp tends to fill the earliest since space is very limited, i.e., age 3-1/2 to Kindergarten. In the event a program, group or service is full, a wait list will be kept for that program, group or service through July 1, 2010.

#### **TUITION AND FEES 2010**

- A non-refundable, non-transferable application fee will secure your space, which is due at the time of application
  - \$125.00
- Camp Tuition
  - \$175 per week

The application fee and tuition cover the **regular camp program, activities, field trips, arts and crafts, and a camp t-shirt**. Additional fees may be required for Specialty Camp programs and Upper Camp Overnights. A few field trips, special events or luncheons might require additional money. Lunch is available for purchase four days out of the week, on the fifth day a bag lunch from home is required.

#### **ENRICHMENT SUBJECTS:**

##### **Sample Schedule**

- Lower Camp** – 8:00 AM – 12:00 AM (3-1/2 year olds through current 1<sup>st</sup> graders)  
Bible ~ Arithmetic ~ Phonics ~ Reading / Reading Readiness ~ Character Education  
12:00 – 12:30 Lunch  
12:30 – 2:00 Nap (K-3 & K-4 only)  
Afternoon snack & specialties
- Upper Camp** – 8:00 AM – 12:00 Noon (currently enrolled in grades 2nd through 6th)  
Bible ~ Math ~ Grammar ~ Literature ~ Character Education  
1:00 – 1:30 – Aerobics  
1:30 – 3:00 - Specialty  
3:00 – 4:30 - Specialty

**REVISED: March 10, 2010**



<i>For Office Use Only</i>	
Control Number	_____
Date Received	_____
Paid	_____ Check _____
Family I.D.	_____
Current WCA Student?	_____

**CAMPER INFORMATION AND PROGRAM SELECTION**

Camper's Name: \_\_\_\_\_

Gender:  Male  Female Date of Birth: \_\_\_\_\_ Age as of June 21, 2010: \_\_\_\_\_

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_  
 \_\_\_\_\_

Grade Completed As of Summer 2010: \_\_\_\_\_

**FAMILY INFORMATION**

Parent 1: \_\_\_\_\_ Parent 2: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

FAX: \_\_\_\_\_ FAX: \_\_\_\_\_

E-Mail: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Child Lives With:  Both Parents  Parent 1  Parent 2  Other (specify) \_\_\_\_\_

**SESSIONS – Select the weeks you wish for your child to attend camp:**

- Week 1: 6/21– 6/25       Week 2: 6/28 – 7/2       Week 3: 7/5 – 7/9
- Week 4: 7/12 – 7/16       Week 5: 7/19 – 7/23       Week 6: 7/26 – 7/30
- Week 7: 8/2 – 8/6       Week 8: 8/9 – 8/13       Week 9: 8/16 – 8/20

**TOTAL AMOUNT DUE:** \$\_\_\_\_\_ \$175 per week  
 The registration fee is nonrefundable and non-transferable. The tuition for Week 3 is \$140.

**For Camp Use Only:**

Enrollment Agreement accepted for Woodstream Day Camp, a non-profit organization, by: \_\_\_\_\_ Date: \_\_\_\_\_

Amount Paid:	Method of Payment	Number	Received
\$ _____	Cash / Check / M.O. / Cashier's Check	_____	_____
\$ _____	Cash / Check / M.O. / Cashier's Check	_____	_____
\$ _____	Cash / Check / M.O. / Cashier's Check	_____	_____
\$ _____	Cash / Check / M.O. / Cashier's Check	_____	_____
\$ _____	Cash / Check / M.O. / Cashier's Check	_____	_____
\$ _____	Cash / Check / M.O. / Cashier's Check	_____	_____
\$ _____	Cash / Check / M.O. / Cashier's Check	_____	_____
\$ _____	Cash / Check / M.O. / Cashier's Check	_____	_____
\$ _____	Cash / Check / M.O. / Cashier's Check	_____	_____



## Enrollment Agreement

I hereby enroll the following child in Woodstream Day Camp, whose full name is:

\_\_\_\_\_

I agree to pay for the above named child the amounts indicated on the application. I understand there is a \$45 charge for a returned check. I understand that there is a \$3.00 per minute charge for late pick-ups of campers from camp. Campers who are picked up late consistently will be dismissed from camp with no refund.

I understand that all tuition and fees to the Woodstream Day Camp are payable as specified above and that no child may enter or continue to attend unless all tuition and fees are paid and all forms required by the Camp are complete and up-to-date, including a Camp Health History, Examination and Emergency Information Form.

I understand that my submission of this application does not in itself guarantee acceptance until it is accepted by the Camp. When accepted by the Camp, the Camp agrees to reserve space for the above-named child in the Woodstream Day Camp for the exact period specified above. I understand that the dates of enrollment specified above cannot be altered unless written acceptance of the change is granted by the Director of the Camp. I also understand that the camp will not alter the above dates without my consent. **I agree that no oral modifications to this agreement will be recognized.**

I understand that camp will be closed for the Independence Day holiday on July 5, 2010.

I understand that if, for any reason, this application cannot be accepted by the Woodstream Day Camp, no contractual relationship shall exist between us, and my money will be returned in full.

**I understand and agree that enrollment is for the entire period specified above and that there will be no refunds, credit, or remission of fees except as follows:**

**If a camper is withdrawn from camp and confirmed in writing by June 1, 2010, the Woodstream Day Camp will refund or credit tuition for all, but one week of camp.**

**In the event that the above-named child is unable to attend camp due to a serious and/or extended illness or injury that has been confirmed in writing by the child's physician, the Woodstream Day Camp will refund or credit tuition for the number of consecutive days absent after the first five consecutive days of absence.**

I understand that all programs are subject to change or cancellation at any time.

I hereby give consent to the Woodstream Day Camp and any agent acting on its behalf to secure and provide any medical attention that might be necessary and urgent during a time when I cannot be contacted by telephone. I further agree to accept responsibility for any medical expenses incurred on behalf of the above-named child under the conditions described above.

I understand and agree that the Camp Director shall retain the right to exclude any child from participating in any activity that, in their considered judgment, the child is not yet ready to participate in safely or where the child's participation at the time in question may interfere with the health or safety of others.

I give permission for my child to go on all field trips and activities with the understanding that the camp will provide transportation for field trips.

I understand that Woodstream Day Camp is not responsible for any of my child's belongings that are lost, stolen or damaged.

I hereby give permission to the Woodstream Day Camp to use photographs, videographs, and/or movies taken of the above-named child at camp for promotional use.

I have carefully read the above conditions of this agreement, fully understanding and accepting them as stated.

PRINT NAME: \_\_\_\_\_ PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_ DATE: \_\_\_\_\_

CARPPOOLING: The camp can include our family information on Carpool Lists:  Yes  No

GROUPING: Please try to place my child with \_\_\_\_\_  
(maximum two names)



### **Behavioral Contract**

Our goal at the Woodstream Day Camp is to promote a peaceful and safe environment that is conducive to learning and having fun. In keeping with our conduct code, it is expected that each camper will:

1. Be respectful of fellow campers, staff, Woodstream property, and yourself.
2. Follow all camp and classroom rules.
3. **Be on time** for all scheduled classes and meetings.
4. Remain on the Woodstream campus at all times with the exception of the Camp's scheduled field trips.
5. Use caution and follow rules while participating in swimming and all other activities.
6. Avoid any activity that could jeopardize your safety or the safety of others.

Any disciplinary infraction will be documented with an Incident Report and will be reviewed by the camp director. If the camper is so severely in violation of the rules of the camp that the director must send him home, his parents must make arrangements to pick up within one hour of notification. Campers who are sent home for disciplinary reasons shall not be eligible for refunds of any kind.

Field trips are to be viewed as a reward for good behavior and not an automatic invitation. Therefore, if your child's behavior does not warrant, he/she will not be able to attend. In the event your child does not attend a field trip, he/she is to stay at home.

We have read the above and we agree to the terms. Required signatures – 1<sup>st</sup> graders and above:

Camper: \_\_\_\_\_ Date: \_\_\_\_\_

Parent / Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### **Camp T-Shirts**

Woodstream Day Camp will present each of its campers with a camp t-shirt upon arrival. Please indicate what size t-shirt you would like to have (keep in mind early registration will assist in ensuring that your size is available):

**ADULT:**      Small    Medium    Large    X-Large    XX-Large

**CHILD:**      X-Small    Small    Medium    Large    X-Large

### **Checklist**

I have enclosed the following:

- Completed Application
- Statement of Faith
- Completed Confidential Parent Comment Form
- Completed Camper Questionnaire
- Completed Enrollment Agreement
- Behavioral Contract
- The nonrefundable registration fee paid by cash, cashier's check, or money order payable to:  
**Woodstream Christian Academy** – Memo Line: Summer Camp 2010
- Payment for sessions

**Mail completed application to:  
Woodstream Christian Academy Camp 2010**

Attention: Registration  
9800 Lottsford Road  
Mitchellville, Maryland 20721

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**Contacts:** Miracle Featherstone & Dean Bailey ~ 301.955.1160



**Confidential Parent Comment Form**

**Camper's Name:** \_\_\_\_\_

The following questions will help us learn more about your child. Please answer the question as thoroughly as possible. Your responses will be read by the camp director, and if necessary, other adults deemed appropriate by the director. Please attach an additional page if necessary.

**PERSONALITY:**

**MEDICAL CONCERNS:** Are there any medical problems, emotional difficulties, psychological issues, social difficulties your child has that we should be aware of? Please include any reading difficulties, eating disorders, or drug or alcohol problems that your child has had. Ongoing treatment and care to continue at camp? Medications? Restrictions or limitations?

**SOCIABILITY:** How does your child interact with others socially? (cooperative, able to form friends easily, mature, etc.)

**INTERESTS AND EXPECTATIONS:** What is your child looking forward to at camp? Why would you like for your child to attend the Woodstream Day Camp?

**TALENTS AND PASSIONS:**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**Camper Questionnaire**  
*(to be filled out by camper)*

**Camper's Name:** \_\_\_\_\_

The following questions will help us learn more about you. Please attach an additional page if necessary.

Why do you want to attend Woodstream Day Camp?

What is your favorite subject in school and why?

What activities do you enjoy outside of classes?

Please tell us anything else about yourself that you would like for us to know.

**Rank your top three preferences of the following sports and activities according to your level of interest, 1 being the highest.**

\_\_\_Dance \_\_\_Track \_\_\_Basketball \_\_\_Soccer \_\_\_Art \_\_\_Cheerleading \_\_\_Computer Skills \_\_\_Football

\_\_\_Other \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



### ***Statement of Faith***

- We believe the Bible to be the inspired and only infallible authoritative Word of God.
- We believe that there is one God, eternally existent in three persons, Father, Son and Holy Spirit, and that God is the Creator of Heaven and Earth.
- We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal return in power and glory.
- We believe that God loves each person and desires the salvation of all.
- We believe that salvation is through faith in Jesus Christ.
- We believe that the regeneration by the Holy Spirit, whose indwelling the Christian is enabled to live a godly life.
- We believe in the resurrection of both, the saved and the lost, those that are saved unto the resurrection of life and those that are lost unto resurrection of damnation.

Please read carefully.

#### ***ARE YOU:***

1. In personal agreement with the doctrines outlined above?
2. Willing for your child to receive training in the doctrines of the school?
3. Prepared to support the Academy as it endeavors to pursue its mission to provide a Christ-centered environment where our students receive a quality education based on Biblical truth that equips them to lead an effective Christian life?

If so, please sign below.

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Father/Guardian Signature & Date

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Mother/Guardian Signature & Date

### **Woodstream Christian Academy**

does not discriminate on the basis of race, color, sex, nationality, or ethnic origin in its admission policies, education policies, or financial policies.