



Dear Families,

The summer time is fast approaching. It is time now to start thinking about Summer Camp options. The summer camp here at Dayspring is organized weekly. Each week is assigned a theme and will have activities and events structured to incorporate the theme. On Wednesdays, we will be leaving campus for fun field trips! All field trips are on Wednesday and will require a separate additional fee which will be separate from your weekly camp fee. Any child who attends camp on Wednesday must go on the field trip, or they may stay home.

Attached is the summer quest registration and schedule. Your child may attend any day(s) a week. We ask however, the days you choose for your child to attend camp are consistent from week to week. For example if you need your child to have summer care on Monday, Wednesday, Fridays, they must attend those days each week. You have the ability to pick and choose the weeks your child comes. They do not have to come, but are certainly welcome each and every week. You will be responsible for camp fee for the weeks that are chosen and if your child doesn't come, you will still be obligated to pay.

We encourage all previous campers to come back and join us this summer, but new families are always welcome! We ask that you return your registration form, camp agreement form; camp schedule and camp registration fee \$10.00 per child, \$5.00 for siblings by May 12th 2017 so we may plan a fun summer. If you have questions please do not hesitate to call me at any time.

Thank you,

Kelsey Hayes

Summer Quest Coordinator

Dayspring Christian Academy

508-761-5552 ext 1104

Weekly Themes and Special Activities

Summer Quest 2017

WEEK	THEME	SPECIAL ACTIVITY AND FEE
June 12-June 16	Adventure	Wednesday June 14 th Oak Knoll Wildlife Sanctuary \$4 per child
June 19-June 23	Safari	Wednesday June 21 st Capron Zoo \$5 per child
June 26-June 30	Olympics	Wednesday June 28 th Sky Zone \$20 per child
July 3-July 8 (No camp Tuesday July 4 th)	Patriotic	Wednesday July 5 th Slater Park FREE
July 11- July 15	Under the Sea	Wednesday July 13 th Mystic Aquarium \$5 per child
July 17-July 21	Christmas in July	Wednesday July 19 th Attleboro Public Pools \$3 per child
July 24- July 28	Mighty Fortress	Wednesday July 26 th Bowling \$10 per child
July 31-Aug 3	Science	Wednesday Aug 2 North Attleboro Fish Hatchery FREE
Aug 7-Aug 11	Sports Week	Wednesday Aug 9 th The Hall @ Gillette Stadium \$6 per child
Aug 14-Aug 18	Fine Arts	Wednesday Aug 16 th RISD Museum (2 nd grade up) Providence Children's Museum (1 st grade down) \$3-10per child
Aug 21-Aug 25	Space Week	Wednesday Aug 23 rd Planetarium \$3 per child
Aug 28-Sept 1	Explorers Camp Week	Wednesday Aug 30 th Ocean Spray Cranberry Bog FREE

*Prices and field trips subject to change/ no rain dates. Price includes admission and bus fees.

Summer Quest Registration Form

Child Information:

Child One:

Name: _____ Date of birth: _____ Age and Grade: _____

Child Two:

Name: _____ Date of birth: _____ Age and Grade: _____

Child Three:

Name: _____ Date of birth: _____ Age and Grade: _____

Does your child (ren) have any medical concerns or allergies? If so please explain:

Parent Contact Information:

Mother: _____ Father: _____

Cell Number: _____ Cell Number: _____

Work Number: _____ Work Number: _____

Email: _____ Email: _____

Address:

Emergency contact information:

Name: _____ Cell Number: _____ Work Number: _____

Relationship: _____

Name: _____ Cell Number: _____ Work Number: _____

Relationship: _____

Who is authorized to pick your child up?

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Parent signature: _____ Date: _____

Child's Name: _____

Please check off the days your child will be attending summer quest:

Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___

Please Indicate Full Day or Half Days (Wednesdays MUST be full day)

___ Full day ___ Half Days

Please note: Full day option is between the hours of 7:00am-6:00pm

Half day option is between 7:00am-12:30pm (Not available for Wednesdays)

Main camp times are 9:00am-4:00pm- however morning and evening care is available please indicate times you would like to have your child in camp

Indicate times your child will be in camp each day: _____

Dates	Weekly Theme	Check if attending
June 12-June 16	Adventure	
June 19-June 23	Safari	
June 26-June 30	Olympics	
July 3-July 8 (No camp Tuesday July 4 th)	Patriotic	
July 11- July 15	Under the Sea	
July 17-July 21	Christmas in July	
July 24- July 28	Mighty Fortress	
July 31-Aug 3	Science	
Aug 7-Aug 11	Sports Week	
Aug 14-Aug 18	Fine Arts	
Aug 21-Aug 25	Space Week	
Aug 28-Sept 1	Explorers Camp Week	



Dayspring 2017 Summer Quest Agreement Form

Child's Name: _____

Parent's Signature: _____

Please initial next to each statement.

____ I have received the camp fee rate for the program and understand that camp fees are due on Monday of each week my child is attending camp. I understand that my rate will not be prorated for non-attendance, including absences due to the program being closed (July 4th), or short term leaves of absence due to illness or vacation. I will be obligated and billed for the weeks I selected on the registration form.

____ I understand that days and schedule selected must be consistent from week to week, and I am responsible for payment even if my child does not attend on selected days. I understand my child must attend a full day on Wednesdays and I will be responsible for paying full day camp fees for Wednesdays.

____ I understand that I am responsible for payment for the weeks that I have signed up for. I understand that any cancellations will result in a \$25.00 cancellation fee per week.

____ I understand that if my child remains at Dayspring past the scheduled closing, I will be charged a late fee. I agree to pay a \$10.00 late fee for each 15 minutes per child, after closing. Any more than three late pickups could result in termination.

____ I understand that the fees for all activities and field trips must be paid separately from weekly camp fees. This activity fee must be paid in full and returned along with the permission slip on the day of the field trip. Campers who show up without payment or permission slip will need to be picked up by parent and are not able to attend camp that day. Children who come on Wednesdays must attend the field trip. I understand that if my child is signed up for the Wednesday and is absent that day I will still be responsible for the activity fee.

____ I understand that if my child appears significantly sick, has a fever or is suffering from other medical issues I will be contacted and responsible for picking up my child from camp within two hours. I understand there is no nurse on staff for the camp, however all employees are trained in CPR and first aid and will respond appropriately.

____ I understand that my child must be at least 3 years old as of September 1 2016 and fully potty trained to enter camp. Children in camp must be preschool-entering 7th grade, no exceptions.

Payment Schedule:

Per the summer quest agreement form, families are responsible for payment on the Monday of the week attending camp. Payments should be cash or check and must be given to the coordinator directly, sealed with an envelope or in the drop box. No payments shall be given to the camp counselors unless otherwise indicated by the coordinator. Weekly camp fees will be determined by coordinator once all information has been submitted for registration. **Registration is \$10.00 for first child, \$5.00 for each additional sibling please submit payment with registration form to coordinator by May 12th 2017.** A 10% discount is given to families who pay in full by May 26th. The following is the camp fee rates for Summer Quest:

Camp Fees
Full Day: 5 day: \$200 4 day: \$180 3 day: \$135 2 day: \$90 1 day: \$45
Half Day 5 day: \$95 4 day: \$80 3 day: \$60 2 day: \$40 1 day: \$20 *Wednesdays must be full day

Child's Name: _____

Parent's Name: _____

Select one:

____ I choose to make weekly payments

____ I would like to pay in full to receive a 10% discount

Stop Office use only -----

Camp Fee Agreement:

____ Your camp fee rate is _____ per week due every Monday.

____ Your total summer care balance is _____ should you pay in full by May 26th you will receive a 10% discount and your total payment due is _____.

Your child(ren) will be attending summer camp:

Parent's Signature: _____ Date: _____