



# Summer Quest For Knowledge

# New Life Christian Academy

## 2010 Summer Quest for Knowledge

### Day Camp

### Information Sheet

Enroll your child now for a fun-filled summer at Summer Quest for Knowledge Day Camp, sponsored by New Life Christian Academy. Each week will be packed with fun filled educational and recreational activities. Fun outings and field trips will also be scheduled throughout the program.

WHO: Completed Kindergarten through completed 6<sup>th</sup> Grade

DATES: June 14 – August 20 (Monday-Friday)

TIME: 7:30 a.m. – 5:30 p.m.

Campers need to be present by 9:00 a.m. each day.

COST: Includes materials and snacks (Extra cost for field trips)

**\$50 registration (Non-refundable)**

\$150/week

\$40/day for part-time (2 days or less); more than 2 days weekly rate is charged

\$1/minute late pick-up charge

WHAT TO BRING: Bag lunch & mat or towel for Quiet time.

QUESTIONS: Contact New Life Christian Center – (919) 405-2080 or New Life Christian Academy (919) 544-5652.

- Weekly fees are due the Friday preceding the upcoming week your child attends.
- Part-time fees are due first attended day of week.

#### Daily Schedule

7:30-8:30 a.m. - Arrival Activities

8:30 a.m. - Morning Snack (Provided)

9:00 a.m. Quest for Knowledge:

\*Computational Science

\*Math Explorations

\*Forensic Science

\*Internet Exploration

\*Modeling Your World: Music

11:30 p.m. - Lunch

12:30 p.m. - Quiet Time

1:00 p.m. - Fun Time

(Field trips/Recreation)

2:30 p.m. - Afternoon Snack

4:00 p.m. - Departure Activities

**Note: Quest for knowledge will not be held on Fridays. Friday will be fun day. Morning and Afternoon snacks will be provided. Tentative schedule subject to changes.**

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### Registration Form

Name of Camper: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

School: \_\_\_\_\_ Completed Grade: \_\_\_\_\_

Parent's Name(s): \_\_\_\_\_

Address: (Include City, Zip Code) \_\_\_\_\_

Phone Numbers: Dad (H): \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Mom (H): \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

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

Emergency Contact: \_\_\_\_\_

Physician's Name \_\_\_\_\_ Phone \_\_\_\_\_

Health Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Phone \_\_\_\_\_

Allergies: \_\_\_\_\_

Please check the appropriate week(s) your child will attend camp.

June 14-18

July 19-23

June 21-25

July 26- 30

June 28-July 2

August 2-6

July 5-9

August 9- 13

July 12-16

Aug 16-20

We are financially responsible for the weeks we reserve and will pay on Monday of each week or the first day attended. If our child needs medical services, staff members of New Life Christian Academy have our consent to take our child to a properly licensed practicing physician or to call EMS. We release New Life Christian Academy and its staff from any and all liability in such situations.

Enclosed is our Registration Fee of \$\_\_\_\_\_ (\$50 per child, non-refundable).

Please make check payable to **New Life Christian Academy** and bring or send to:

7415 Fayetteville Street, Durham, NC 27713

Parent's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date: \_\_\_\_\_