



Summer Camp Checklist

- Create and MEID account at Apply for Admission at Maricopa.edu/admissions.
 - o Fill out the Student Admission Application using the **parent/guardian** information.
 - o To complete this step, choose GateWay Community College and submit proof of identification.
 - o Register for the camps that you wish to attend by selecting "non-credit" and entering the course number associated with the camp.
- Complete and return the attached Summer Camp Application and return to the GateWay Children's Learning Center no later than **May 17, 2018**.
 - o Summer Camp Interest Check List
 - o Family Information Document
 - o Parent Contract and Consent
 - o Behavior Contract
 - o Photo Release Form
 - o Travel Assumption of Risk and Release of Liability
 - o ADHS Emergency, Information and Immunization Record
 - o Copy of child's most current immunization record

GateWay Children's Learning Center

108 N. 40th St.

Phoenix, AZ 85034

Tel: 602-286-8130; e-mail: leia.wilson@gatewaycc.edu

- Once your complete application is received, your child will be registered for the chosen summer camp(s) and you will be notified via e-mail (at the e-mail address you provide).
- Payment must be received by Wednesday prior to the start of each registered camp. If payment has not been received in full, your child will not be admitted. Payment may be made on-line through your Maricopa Student Center or in person at the GateWay Community College Cashier's Office located in the IE building on the Washington campus.

Summer camp will be held at GateWay Children's Learning Center-Montecito Campus located at: 715 E. Montecito Avenue, Phoenix, AZ 85014



Family Information

Parent/ Guardian Information:

Parent/Guardian First and Last Name: _____

Maricopa Student ID#: _____

Physical Home Address: _____ City: _____ State: _____ Zip: _____

Phone number: _____ E-Mail Address: _____

Child's Information:

Name: _____ Male Female

School: _____ Birthdate: _____ Age: _____

Ethnicity* American Indian/ Alaskan Native Black White Asian/Pacific Islander Hispanic Other

Does your child have any special needs or need accommodations?

Child Pick-up: Photo ID will be required by any party picking up a child from summer camps:

- I will be the only person picking up my child
- I give permission for _____ to pick up my child from
(Name)
GateWay Community College Summer Camps. They can be reached at

(Phone number)

Breakfast and Lunch:

- My child does not have food allergies and is able to eat anything provided during breakfast and lunch.
- My child does have food allergies (as listed below).
Please list food allergies and severity

Parent Guardian Name: _____ Signature: _____

Date: _____

* Voluntary information.

Gender and Ethnicity are used to comply with Federal Reporting and are not use for any discriminatory purpose.



Parent Contract and Consent

Please read, initial each statement and sign this agreement:

As the parent or legal guardian of _____
(Child's name)

_____ I understand that I (or party designated) am responsible for picking up my child promptly when my scheduled summer camp ends. If I do not, a \$1 per minute late charge will be added to my tuition account for each child.

_____ I understand that if my child becomes ill or needs to be removed from the camp for behavioral (or any other) reason, I am responsible for picking him/her up immediately.

_____ I understand that my child will use all of the play equipment and participate in all of the activities of the school.

_____ I understand that the Director or staff will take whatever steps may be necessary to obtain emergency medical care if needed. The steps may include, but are not limited to the following:

1. Attempt to contact the parent or guardian
2. Attempt to contact the persons listed as emergency contacts on the Emergency Information and Immunization Record. You are responsible for maintaining this form with current information.
3. If the emergency constitutes, we will call for an ambulance to transport your child first. If not, an ambulance will be contacted for transport once the parent/guardian has been notified.
4. Any expenses incurred above, will be the responsibility of the child's family.

I have read and understand each of the above items. I also agree that this consent form shall remain in effect unless written notice is provided to the center.

Parent/Guardian Signature: _____ Date: _____



GateWay Community College Summer Camp

Behavior Contract

I, _____ agree to participate in this program in a cooperative, positive
(Child's Name)

manner. I understand that the teachers and staff will help me make appropriate choices in my behavior. Should I choose not to cooperate or make appropriate choices I understand and accept that I will:

- Receive a warning
- I will be removed from the classroom and given a moment to regain my composure

If the above does not help my behavior choices then my parent(s) will be notified. If the behavior continues, my parents will be required to pick me up and I will not be able to return for the rest of the day.

I have read and understand the above consequences of my behavior. My parent(s) and I have discussed this information, and they agree to the above.

Child's Signature: _____

Parent's Signature: _____ Date: _____