

Del Norte Summer Day Camp '18

Calling all campers ages 6-12! Get ready for a summer full of excitement. Join us for nine adventurous one-week camp sessions with great food, fun activities, and exciting field trips!

Each session we will explore a new theme by learning about wild animals, creating cartoons, discovering musical talents, hosting game shows, and much more all while using teamwork, creativity, and imagination. This is one summer of exploration you will not want to miss!

Weekly Themes

Week 1:	Wilderness Week	6/11-6/15
Week 2:	Cartoon Craze	6/18-6/22
Week 3:	Time Travelers	6/25-6/29
Week 4:	Games Galore	7/2-7/6
Week 5:	Music Mania	7/9-7/13
Week 6:	Splish Splash	7/16-7/20
Week 7:	Artful Antics	7/23-7/27
Week 8:	World Wanderers	7/30-8/3
Week 9:	Fun & Fitness	8/6-8/10



Del Norte~3040 Becerra Way, Sacramento, CA 95821~ (916) 483-5111

Camp Information

- Weekly hours are **Monday-Friday 8:00am-5:00pm**.
- No camp will be held on Wednesday, July 4.
- Half-day and Drop-In options are available.
- Extended Care is available for an additional fee per session.
- Member-only registration is open through **Monday, April 30!**
- Non-member registration will begin on Tuesday, May 1 (space permitting).
- Sibling and early registration discounts are available!

Member Pricing

Full Day Camp:	\$200/week (\$160 during week of July 4)
Half Day Camp: AM Session 8:00-12:30pm or PM Session 12:30-5:00pm	\$150/week (\$120 during week of July 4)
Drop-In Days:	\$50/day
Extended Care: AM Care 7:00-8:00am or PM Care 5:00-6:00pm	\$25/week/session

Non-Member Pricing

Full Day Camp:	\$250/week (\$200 during week of July 4)
Half Day Camp: AM Session 8:00-12:30pm or PM Session 12:30-5:00pm	\$200/week (\$160 during week of July 4)
Drop-In Days:	\$60/day
Extended Care: AM Care 7:00-8:00am or PM Care 5:00-6:00pm	\$35/week/session

For questions: Please contact Sarah Eaton, Camp Director,
at 916-483-5111 or sarahe@delnorteclub.com

Del Norte Summer Camp Registration Form

Camper Information:

Name: _____ Age: _____ D.O.B. _____

Address: _____ Zip: _____

T-Shirt Size: Kids- ___ S ___ M ___ L ___ XL Adult- ___ S ___ M ___ L ___ XL

Parent(s) Information:

Name(s): _____

Work Phone: _____ Cell Phone: _____

E-Mail: _____ Member: _____ Non-Member: _____

Camp Session and Fees

Please fill out the section below. Circle F if your camper(s) will be attending full days. Circle the AM or PM for a half-day session. Please also circle a form of extended care (additional cost) if needed and check the box if your camper(s) will be attending the included field trip. For Drop-In days, please see the following page.

<u>Session:</u>	<u>Number of kids:</u>	<u>Full Day:</u>	<u>Half-Day:</u>	<u>Ext. Care:</u>	<u>*Field Trip:</u>
#1 (6/11-6/15)	_____	F	AM or PM	am or pm	<input type="checkbox"/> Zoo
#2 (6/18-6/22)	_____	F	AM or PM	am or pm	<input type="checkbox"/> Movies (Incredibles)
#3 (6/25-6/29)	_____	F	AM or PM	am or pm	<input type="checkbox"/> Rollerland
*#4 (7/2-7/3.7/5-7/6)	_____	F	AM or PM	am or pm	<input type="checkbox"/> John's Incredible Pizza
#5 (7/9-7/13)	_____	F	AM or PM	am or pm	<input type="checkbox"/> Country Club Lanes
#6 (7/16-7/20)	_____	F	AM or PM	am or pm	<input type="checkbox"/> Water Slide at Del Norte
#7 (7/23-7/27)	_____	F	AM or PM	am or pm	<input type="checkbox"/> Crocker Art Museum
#8 (7/30-8/3)	_____	F	AM or PM	am or pm	<input type="checkbox"/> Skatetown Ice Skating
#9 (8/6-8/10)	_____	F	AM or PM	am or pm	<input type="checkbox"/> Sky High

*Please note that camp is closed on Wednesday, July 4.

2nd and 3rd child are 10% off!

Register and pay before Friday, May 18 and receive \$10 off each week!

I would like the weekly amount charged to my account. Initials: _____

Drop-In Days:

Please fill out the section below. Write the number of campers that will be attending and check the boxes for the needed Drop-In days. Extended care prices are \$5/day/session. Drop-In days are subject to availability. All Drop-In registration forms must be turned in one week prior to the needed session day. For more information, please contact Sarah Eaton, Camp Director, at 916-483-5111 or sarahe@delnorteclub.com

Number of Kids	Session Dates	Days of the Week					Extended Care
	#1 6/11-6/15	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> Th	<input type="checkbox"/> F	<input type="checkbox"/> AM or <input type="checkbox"/> PM
	#2 6/18-6/22	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> Th	<input type="checkbox"/> F	<input type="checkbox"/> AM or <input type="checkbox"/> PM
	#3 6/25-6/29	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> Th	<input type="checkbox"/> F	<input type="checkbox"/> AM or <input type="checkbox"/> PM
	#4 *7/2-7/6	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> Th	<input type="checkbox"/> F	<input type="checkbox"/> AM or <input type="checkbox"/> PM
	#5 7/9-7/13	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> Th	<input type="checkbox"/> F	<input type="checkbox"/> AM or <input type="checkbox"/> PM
	#6 7/16-7/20	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> Th	<input type="checkbox"/> F	<input type="checkbox"/> AM or <input type="checkbox"/> PM
	#7 7/23-7/27	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> Th	<input type="checkbox"/> F	<input type="checkbox"/> AM or <input type="checkbox"/> PM
	#8 7/30-8/3	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> Th	<input type="checkbox"/> F	<input type="checkbox"/> AM or <input type="checkbox"/> PM
	#9 8/6-8/10	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> Th	<input type="checkbox"/> F	<input type="checkbox"/> AM or <input type="checkbox"/> PM

****Please note that camp is closed on Wednesday, July 4.***

Discounts do not apply to Drop-In registrants

I would like the weekly amount charged to my account. Initials: _____

Camp Agreement

- 1. Cancellation and refunds:** There are no refunds for missed camp days. In order to qualify for a refund, participants must notify the Camp Director of cancellation fourteen (14) days prior to the beginning of the registered session.
- 2. Behavior:** Children must abide by all Summer Camp rules at Del Norte. Each child must behave appropriately toward other campers, members, and Del Norte staff at all times. Failure to do so will result in disciplinary action by camp staff and/or the Camp Director. Inappropriate behavior will result in dismissal from the camp without a refund in camp fees.
- 3. Attire:** Campers should dress in play clothes and athletic shoes. Sandals are OK as long as the kids bring a pair of athletic shoes with them. A swimsuit and towel will be needed daily. *Please label all belongings.
- 4. Refreshments:** The camp will provide lunch and snacks for camp participants. A weekly menu will be sent home. Food substitutions will not be made unless there is a noted allergy. Please make sure your child eats breakfast before arrival. Campers may bring their own food or drinks. Kids may purchase extra items at the snack bar.
- 5. Attendance:** Parents must sign their children in and out daily. Children may not sign themselves in or out unless written consent has been approved by Camp Director. Children that have not paid for extended childcare must be picked up by 5:00pm. Those campers with extended childcare must be picked up by 6:00pm.
- 6. Late Fee:** Any camper(s) not picked up by their scheduled time will be charged the \$25 extended care fee.
- 7. What to bring daily:** Each child should bring a **swimsuit, towel, sunscreen, water bottle**, and a change of clothes (optional) with them each day. Other required items will be requested prior to the date needed.
- 8. Field Trips/Weekly Themes:** Field Trips are generally held every Friday with transportation by bus. Del Norte Day Camp has reserved usage of the gym at Arcade Church for the purpose of indoor games and camp activities. Campers will be escorted by camp staff to the gym on days of usage. Each camp week will focus on themed activities tied to the trip schedule. Field trips are subject to change. Any changes to the trip schedule will be announced at camp. Permission slips will be issued each Monday for parents to sign and return.
- 9. Daily Schedule:** We have organized outdoor and indoor activities, weekly art projects, daily games, swim time and a variety of other fun filled events. We try to keep the kids active and will provide details about weekly field trips on the first day of each week. Below is a tentative daily schedule.

7:00-8:00*	Extended Care Option
8:00-8:45	Welcome and Sign in
9:00-10:00	Outdoor Games
10-10:15	Snack
10:15-12:15	Outdoor Group Activities & Indoor Crafts
12:15-1:00	Lunch
1:00-3:00	Swim
3:00-3:45	Social and Snack
3:45-5:00	Clean Up, Free Play & Parent Pick Up
5:00-6:00*	Extended Care Option
- 10. Payment Policies:** Payment for the initial week of planned attendance is required at time of sign-up to reserve your child's space in the camp. Cash, check, or card payments are due by the **Monday** of each session and are payable to Del Norte. Members wishing to charge the camp fees to their membership account, please initial the box on the registration page or see Camp Director.
- 11. Photography Policy:** I give Del Norte permission to print and publish my child's picture for promotional purposes. I understand that I will not receive compensation for my child's picture.

Camper Signature

Parent/Guardian Signature

**Del Norte
Summer Day Camp Emergency Form**

Child's Name _____ M / F Date of Birth _____

Address _____ Home Phone _____

Parent's Name _____ Work Phone(s) _____

Cell Phone (s) _____

If my child is ill or has an emergency and I cannot be reached, please contact:

Name _____ Phone _____

Name _____ Phone _____

Person, other than parents, that is authorized to pick up child from club:

Name _____ Relationship _____

Please mark any of the following that apply to your child:

Epilepsy: ____ Heart Condition: ____ Nose Bleeds: ____ Migraines: ____

Asthma: ____ **Allergies:** Bee Stings: ____ Peanuts: ____ Medication: ____

Please describe: _____

Physical Limitations: _____

Medications: _____ Current dosage: _____

Name of Insurance: _____ ID#: _____

Physician: _____ Phone: _____

Dentist: _____ Phone: _____

Any other health problem we should know about to assure your child's well being?

I hereby give my permission for my child, _____, to participate in the Del Norte Day Camp. In consideration for participation in this program, I release Del Norte, its owners, agents, and employees from any and all liability that may arise as a result of accident or injury during the program. In the event of a medical emergency, I give my permission for a physician to provide the needed medical care for my child.

x _____
Parents Signature

_____/_____/_____
Date