

Thank you for your interest in Lamb of God Lutheran Church & School, **Camp SWAG!** Attached is an enrollment packet for the **Summer Session**. Before you turn in the enrollment packet, please make sure you have completed the following:

- Registration Form:** Please complete and sign. Also, please be sure to include as many working phone numbers as possible (In the event of any emergency, we need to make sure we can get in touch with you). Important—since we communicate frequently via email, please be sure to give us several email addresses which you can check from both home and work.
- Medical Information Form:** You may have a doctor/physician complete this form, OR you can complete the bottom portion to ensure that your child has been examined by a licensed physician in the past year.
- Treatment for Minors Consent Form:** This form is needed in case of emergency and must be filled out completely. If you have insurance, please make sure to complete all of the insurance portion. If you do not have insurance, please write “none” in the insurance box.
- General Permission and Release Form:** Please indicate your preferences for each section. The bottom portion must be notarized. We have a notary on campus who will be happy to assist you with this.
- EFT Enrollment Form:** Please complete and sign the bottom. You may choose from checking, savings or credit card; however, you must enroll in our EFT program.
- Tuition Form:** Please make sure you read completely and sign at the bottom.
- Registration Fee:** You may pay the registration fee by check or we can draft it from your EFT account. Registration fees are due in advance, before your child starts school.
- Vaccination Records:** We must have a current copy of your child’s vaccination records. You may attach a copy with your enrollment packet, or have a copy faxed to us at (281) 446-0289. We must receive vaccination records before your child starts school, as required by the state of Texas.
- Hearing/Vision Screening:** If your child is 4 years or older, we must have a current copy of your child’s hearing/vision screening on file. You may attach a copy with your enrollment packet, or have a copy faxed to us at (281) 446-0289.
- Parent/Student Handbook with acknowledgement form:** You will receive the Handbook upon enrollment, please sign the acknowledgment form at that time.
- Summer Calendar** **5 Day** _____ **3 Day** _____

*Once you have ensured that your enrollment packet is complete and all supporting documentation has been obtained, this information **MUST** be returned to a director of the school. It is highly recommended you make an appointment for this purpose. Your child’s spot is only reserved once all paperwork is complete and the registration fee is paid and accepted. You will receive notification once your child has been accepted.*

Lamb of God Lutheran Church & School
Camp SWAG
June 4, 2018 – August 15, 2018

Camp SWAG Registration Fee: \$75.00 per child (full summer only)
Weekly Tuition: \$170/week (5 days/wk.) \$120/week (3 days/wk. M/W/F)

Camp SWAG Admission Date: _____ Camp SWAG Withdrawal Date: _____

Child's Last Name: _____	First Name: _____	Gender: M/F
Date of Birth: _____	Financial Responsibility: _____	
Church Home: _____	Child Baptized? Yes or No	
T-shirt Size (circle one): Youth S Youth M Youth L Adult S Adult M Adult L		

Father's Name: _____	E-Mail: _____
Address: _____	Home Phone: (____) _____
City: _____ Zip: _____	Cell Phone (____) _____
Father's Employer: _____	Work Phone (____) _____

Mother's Name: _____	E-Mail: _____
Address: _____	Home Phone (____) _____
City: _____ Zip: _____	Cell Phone (____) _____
Mother's Employer: _____	Work Phone (____) _____

I hereby authorize my child to leave LOGLS <u>only</u> with the following persons other than parents:		
Name: _____	Telephone: _____	Relationship: _____
Name: _____	Telephone: _____	Relationship: _____

I designate the following person to be contacted in the event of an emergency if I cannot be reached:		
_____	_____	_____
Name	Telephone	Relationship

Parent's Signature _____	Date _____
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Lamb of God Lutheran Church & School

1400 FM 1960 E. Bypass ♦ Humble, TX 77338

281-446-LAMB (5262)

Connecting Communities to Christ

2018 Camp SWAG Tuition Policies

- \$75.00 Registration fee (full summer) must be submitted in full with the application in order to hold a spot for Camp Swag.
- Tuition includes breakfast (for students arriving by 7:30am), two snacks and lunch
- Tuition payments are the same regardless of illness, family vacation, or school holidays
- All campers are allowed a One-week vacation Credit to use at your discretion.
- 5% discount will apply for families who pay tuition for the entire summer in advance
- 5% discount for Clergy/educators/firefighters/EMT's/police officers/military
- 5% discount will be applied for each additional sibling
- 10% discount will be applied to Lamb of God church members
- All tuition payments must be remitted via EZ-EFT electronic bill payment weekly, in advance of services rendered.
- Late pick-ups will be charged \$1.00 per minute after 6:05 p.m.
- Drafts/checks for tuition/fees that are returned due to insufficient funds are subject to penalty charge of \$25.00
- After an insufficient check has been received, that payment **MUST** be made by cash or money order
- Tuition and schedules are subject to change without notice

I have read and agree to adhere to the 2018 Camp SWAG tuition policies.

Print student name: _____

Parent Signature: _____ Date: _____



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Connecting Communities to Christ

Tuition Agreement

Child's Name (Please Print): _____ Start Date: _____

Registration Fee: _____ Paid OR Draft _____

Class Assignment: _____ Weekly Tuition: _____

Tuition Discounts: Member 10% _____

Sibling 5% _____

Full Payment 5% _____

Clergy/Educator/Police/Firefighter/EMT/Military 5% _____

Tuition Fees: Credit Card fee + 3% _____

WEEKLY DRAFT: _____

**I have read and agree to adhere to the 2018
Camp SWAG Registration/Tuition Rates and Policies.**

Parent/Guardian
Signature: _____

Please Print
Student's Name: _____

Date: _____

Rev. Mark Brunette
Senior Pastor

Shelly McMullen
Director of Christian Education

LAMB OF GOD LUTHERAN CHURCH & SCHOOL
Camp SWAG
EZ-EFT ENROLLMENT FORM

By signing this form you authorize us to draft your child's weekly tuition amount every Friday in advance of services for the upcoming week as well as any other fees incurred.

NAME OF CHILD: _____

Choose One:

Checking Account Transfer (Please attach voided check)

Credit Card (Mastercard or Visa) (Please attach copy of front of credit card)

Please Note: a 3% service fee will be added to your weekly draft

Visa Card Number: _____ Exp: _____

Mastercard Number: _____ Exp: _____

Account Holder Information:

(Note: the information listed below must match the information on the account)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Authorization:

I hereby authorize _____ to make payment on my behalf from the checking,
Name of financial institution
savings or credit account listed, and transfer it to **Lamb of God Lutheran Church and School.**

Signature: _____ Date: _____

OFFICE USE ONLY

Registration Fee \$75 or \$40 Date Paid/Drafted _____ Check# _____ Receipt No. _____ Draft _____

Spring Start Date: _____ Summer Start Date: _____ Days per Week 5 or 3 Room Assignment _____

Circle Discounts: Member Sibling Employee Full Payment Police/Fire/EMT/Military/Teacher

Paperwork Entered _____ Paperwork Complete _____ EFT Entered _____ Door Code _____

TREATMENT FOR MINORS CONSENT FORM

Camp SWAG 2018

Northeast Medical Center or other: _____. Please accept this letter as authority to treat my child, in case of emergency, whose name is listed below:

CHILD (Full Name)

BIRTHDATE

Allergies: Medication _____
 Food _____
 Environmental/Other _____

Regularly Administered Medications: _____

Child's Doctor _____ Phone (____) _____

Located at _____

If you are unable to contact him/her, please accept this letter as your authorization to use the doctor on call in the emergency room for any necessary medical treatment.

I/We being the parent(s) or legal guardian(s) of the above-named minor do hereby appoint the following individual(s) to act in my/our behalf in authorizing medical, dental, surgical care, and hospitalization for the above-named minor in the event I cannot be reached.

Name & Relationship to Child	Address	Phone

Insurance Co: _____ Group #: _____ Benefit Verification Phone # (____) _____
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Mother's Employer: _____ Phone (____) _____

Father's Employer: _____ Phone (____) _____

General Permission & Release:

WATER PLAY

I hereby give my consent for _____ (child's name) to participate in the following water activities: (Please initial each activity you give consent for)

_____ Water Table/Sprinklers _____ Wading Pools _____ Splashing Pools

PHOTOGRAPHIC RELEASE

I give my permission to Lamb of God Lutheran Church & School to photograph/videotape my son/daughter _____, and use the resulting photographs/videotape for any lawful activities for the purpose of promoting Lamb of God Lutheran School to the public (including but not limited to Facebook and our school website). I relinquish all rights, title and interest in the finished photographs, negatives, and videotape film.

Initial - _____ yes _____ no Classroom use only _____ yes _____ no

SCHOOL DIRECTORY/CHURCH MAILING LIST RELEASE

I give my permission to Lamb of God Lutheran Church & School to include my family and child in the school directory which will only be distributed to enrolled students.

Initial - _____ yes _____ no. I also give permission to add my family to the church mailing/email list for release of church information only. Initial - _____ yes _____ no.

MEALS/SNACKS

*I understand that the following meals will be served to my child while in care:

_____ Breakfast _____ AM Snack _____ Lunch _____ PM Snack

If I choose to send a snack or lunch for my child, Lamb of God is not responsible for my child's nutritional needs for that meal or snack. Any snack or food sent from home for your child should be nutritious.

MEDICINE RELEASE

The following medications are available at the facility to use if needed. Please initial only the following items that you authorize to be used on your child.

_____ Insect Repellent _____ First Aid Cream _____ Sunscreen

FIELD TRIP/TRANSPORTATION RELEASE

I hereby give consent for my child to attend any In-house field trips which occur during the summer months. Initial- _____ yes _____ no.

MEDICAL (**This must be notarized. **)

In the event that I or my spouse cannot be reached to make arrangements for emergency medical attention, I authorize the person in charge to secure medical help for my child.

Parent Signature: _____

Subscribed and sworn to, before me, this _____ day of _____ 20____.

Notary Public Signature: _____

Medical Information Required Camp SWAG 2018

Child's Name: _____ Birthdate: _____

Parent's Name: _____

A CHILD WHO APPEARS ILL UPON ARRIVAL WILL NOT BE ADMITTED TO CLASS!

NOTE: The parent should authorize the physician (at the time of registration) to accept a call from Lamb of God Lutheran Church & School's staff for emergency medical care.

ADMISSION REQUIREMENT

One of the following must be presented when your child is admitted to the program. Check to indicate the option you select:

_____ Signed Doctor's Statement: I have examined the above named child within the past year and find that he/she is physically able to take part in the program.

Physician's Written Name

Physician's Signature

Date

OR

_____ Parent's Statement: My child has been examined within the past year by a licensed physician and is able to participate in the program. *Within 12 months of admission, I will obtain a healthcare professional's signed statement and will submit it to the child-care operation.

Name, complete address and phone number of physician

Signature – Parent of Legal Guardian

Date

*** CURRENT IMMUNIZATION RECORD MUST BE ATTACHED OR FAXED TO (281) 446-0289.**

***YOU MUST PROVIDE PROOF OF HEARING/VISION SCREENING FOR CHILDREN AGE 4 AND UP.**

Lamb of God Vision and Hearing Statement

Texas state law requires all four year old children to have their vision and hearing checked. If your child has already had their hearing and vision checked, please either:

- Include a copy of your child's visual acuity and hearing/sweep check results with this completed enrollment packet

OR

- Complete and sign the statement below:

I, _____, confirm that my child _____ is current on both their state mandated vision and hearing records and that the records are on file at the pre-kindergarten program or school that my child normally attends. The name, address, and telephone number of the program/school are:

Signed

Date

2018 Camp Swag Operational Policies

► Please keep this information at home for your records ◀

Application Form

For your child's safety and to comply with state regulations, the Enrollment Information Form must be completed and on file in the school office before your child may attend. This form must be renewed annually.

Camp SWAG Registration Fee: \$75.00 per child for the entire summer session.

The Health Requirement Form, which includes the immunization record, Hearing and Vision results, doctor's statement, and doctor's signature, must be provided. Also, all paperwork included in this packet must be returned to the school office prior to your child's admission. *The Treatment for Minors Consent Form must be notarized on the back. The Director is available to notarize free of charge; please visit them in their respective offices.

Tuition

Weekly tuition will be \$170.00 (5 days/wk.) \$120.00 (3 days/wk. M/W/F) for the entire summer; (this includes food and all activities.) All tuition payments must be remitted via EZ-EFT electronic bill payment weekly in advance of services rendered. If tuition is not paid, the child will not be allowed to attend camp.

- Your tuition payment remains the same regardless of illness, family vacation, or holiday.
- Each camper is eligible for a one-week vacation credit during the summer. Any additional vacations will be charged half of the tuition to reserve the campers spot.
- Registration fees can be paid by check or EZ-EFT electronic draft.
- A charge of \$25.00 will be assessed for returned drafts/checks.
- After an insufficient check has been received, that payment **MUST** be made by money order.

Hours of Operation

- Camp begins June 4, 2018 and ends August 15, 2018.
- Camp hours are 6:30 AM to 6:00 PM Monday – Friday.
- A late fee of \$1.00 per minute for each child will be charged after 6:05 PM.
- After three late pick-ups, the charge increases to \$3.00 per minute. Campers must arrive no later than 10:00 A.M. on the days of In-house field trips.
- If children arrive after, they might not be able to attend the In-house field trip due to schedules & ratios.

Arrival and Departure

- Parent must drop off and pick up in their classroom for safety purposes. Camp Swag's classrooms are located in the Education Building. Parents must sign in/out their children.
- The person must have picture ID in order to pick-up your child.

Needed Items

Please mark your child's name on **ALL** items they bring to camp. It is the child's responsibility to keep up with their toys, clothes and extra money. The staff is not responsible for any lost or stolen items. Please use discretion before sending items of monetary or sentimental value to camp.

Daily

- Backpack
- Water bottle with child's name on it
- Sunscreen and bug spray
- Extra set of clothes

Water Days

- Towel(s)
- Swim suit
- Swim shoes

Other items your child may bring

- Ipod with earphones and age appropriate music (no inappropriate language)
- Gameboys (No trading or borrowing to take home)
- Board games
- Pillow and Blanket
- Movies for movie day

Games

Campers may only bring non-violent games to play that is suitable for all ages, rated 'E' for everyone. We do not allow the campers to play games that are violent. Please be sure to mark you child's name on all Gameboys and/or game cartridges as Lamb of God is not responsible for lost or misplaced items. Also, if your child's game device takes photos, please be aware of all images on the device.

Movies

Camp SWAG's movie policy is movies must be rated 'G' and 'PG' **only**.

We will not show a PG-13 movie at school. If there is a certain movie that you do not want your camper to watch, please notify your teacher. Any videos, television shows, or movies viewed on an electronic device must be 'G' or 'PG' rated.

Classroom Management/Discipline

Campers who commit minor rules infractions will be reminded of classroom rules and expectations. Major rules infractions will result in the camper having the privilege of attending the In-house field trip for that week. Please discuss any questions regarding this policy with your Camp SWAG teachers or a director. Our goal is that all campers have a safe, fun, and educational summer!