



## Spring Break 2017 Registration Information

### Camp Dates and Themes (Kindergarten-5th Grade)

	K-1	2-3	4-5
March 13	Astronaut Academy	3, 2, 1, Blast Off!	Planet Patrol
March 14	Tiny Captains	Treasure Hunters	Pi is for Pirate
March 15	Bits and Bots	Rockin' Robots	Challenger Robot League
March 16	Imagineering	Build It Bigger!	Future Builders
March 17	Over the Rainbow	Science Sham-rocks!	Luck O' the Science
March 20	Lego Logic!	Minecraft Builders	Minecraft Mania

### Additional Information

#### COST

Daily Camp cost is \$40 per day. AM Extended Care is \$5 per day. PM Extended Care is \$5 per day.

#### REGISTRATION

This form (online or hard copy) must be completed in its entirety and returned no later than one week before the camp date. Camps are limited in size; therefore, registration applications will be processed on a first come, first serve basis. Registration is complete and confirmed on receipt of full payment.

#### CANCELLATIONS/ REFUNDS

Requests for cancellation must be received in writing by the Challenger Learning Center prior to camp session start date. Full refunds will be allowed for written requests received two weeks in advance of the **camp's** start date. Half refunds will be allowed for written requests received one week in advance of the **camp's** start date. No refunds will be granted after the camp session start date. Please allow approximately 90 days for refunds to be processed, unless payment was received by credit card.

#### CAMP ADMINISTRATION

Camps will be conducted at the Challenger Learning Center on Kleman Plaza from 9:00 a.m. until 4:00 p.m., unless enrolled in extended care. Parents/guardians must designate on this registration form an authorized individual to drop off/pick up campers if parents/guardians are unable to do so. Parents/guardians and/or authorized individuals must accompany campers into the building and sign them in and out every day. Parents/guardians must always have photo ID with them and be listed as an authorized individual. We are located at 200 South Duval St., on the corner of College Ave. and South Duval St.

## EXTENDED CARE

Extended Care is available to accommodate busy schedules. Campers arriving earlier than 8:50 a.m. or departing later than 4:00 p.m. MUST be enrolled in the Extended Care. Campers enrolled in AM Extended Care may sign in as early as 7:50 a.m. For PM Extended Care, campers may be signed out any time before 6:00 p.m. to avoid a \$1/minute late charge. AM Extended Care, 7:50 a.m. to 9:00 a.m., is \$5/day. PM Extended Care, 4:00 p.m. to 6:00 p.m., is \$5/day. You must indicate on the registration form that you plan to participate in Extended Care and include the cost in your camp payment. Extended Care campers will not be participating in extra camp activities during extended hours.

## LUNCH

Lunch is provided daily. Lunch includes pizza (cheese or pepperoni), a side, and water to drink. Water is provided throughout the day. You may provide your child with snacks and/or money to visit the concessions stand if you choose. *Vegetarian options are available. Please indicate on the registration form if this option is preferred.*

## PARKING

Camper pick-up/drop-off parking is available in the Kleman Plaza parking garage or at metered street spots. Bring your Kleman Plaza parking ticket into the CLC with you and CLC staff will validate tickets obtained within 30 minutes. Please note: you could be ticketed or towed for parking at the U.S. Post Office or in the loading zone on College Ave.

## CAMPER CONDUCT

Camps are designed for the enjoyment and benefit of all campers enrolled. Our goal is to be educational as well as entertaining and campers are expected to abide by camp rules. With that as the objective, we anticipate that no camper is here who does not want to be here. Should any disciplinary problems occur, camp staff will contact the parent/guardian to discuss the child's behavior, possible remediation and/or picking up their camper. Please do not send any toys, books, electronic devices, etc. with the camper unless approved by a camp counselor. If items from home are brought, they may only be used during extended care, lunch and recess. The CLC is not responsible for lost/stolen/broken items brought from home.

## CONTACT INFORMATION

Should you need additional information, please call (850) 645-7777, weekdays from 7:30 a.m. until 4:00 p.m.; For content/curriculum, contact our Education Manager at (850) 645-7787.

# Challenger Learning Center of Tallahassee 2017 Spring Break Camp Registration Form

## CAMPER INFORMATION

NAME	DATE OF BIRTH		
ADDRESS	CITY	STATE	ZIP
SCHOOL ATTENDING	GRADE	GENDER	

## PARENT/GUARDIAN INFORMATION

PARENT/GUARDIAN NAME			
ADDRESS	CITY	STATE	ZIP
EMAIL ADDRESS			
CELL PHONE	DAY PHONE		

## TRANSPORTATION AUTHORIZATION

Please note all parents and authorized individuals must present photo identification when picking up your camper.  
*My child will be transported to the Challenger Learning Center by:*

PARENT/GUARDIAN	PHONE NUMBER
OR AUTHORIZED INDIVIDUAL(S)	PHONE NUMBER
SIGNATURE	

## CAMP SELECTION

CAMP DATES: \_\_\_\_\_

EXTENDED CARE NEEDS (Please circle)    NONE    AM    PM    |    Please include entire payment for extended care in registration payment.

## LUNCH MENU - Pizza

Pepperoni  Cheese

Vegetarian options available, please indicate if preferred:

## PAYMENT INFORMATION

DAY CAMP @ \$40 per day	\$ _____
AM EXTENDED CARE FEE @ \$5/day	\$ _____
PM EXTENDED CARE FEE @ \$5/day	\$ _____
<b>TOTAL AMOUNT TO BE CHARGED</b>	<b>\$ _____</b>

- No sibling or member discounts apply for daily camps.
- Registration is complete on receipt of full payment. Registrations are accepted on a first-come, first-serve basis.
- VISA, Mastercard, Discover, AMEX, FSU Card, Check or Cash are accepted. Please do not mail cash. Cash may be dropped off at our administrative offices during business hours. If paying by check, you must also provide your valid driver's license number.

VISA    MASTERCARD    CASH    CHECK #:    DRIVER'S LICENSE # (Check only)

CREDIT CARD NUMBER    EXPIRATION DATE

NAME ON CARD    SIGNATURE

## HOW DID YOU HEAR ABOUT CAMP CHALLENGER? Please check all that apply.

<input type="checkbox"/> TV	<input type="checkbox"/> NEWSPAPER	<input type="checkbox"/> DIRECT EMAIL	<input type="checkbox"/> RETURNING CAMPER
<input type="checkbox"/> RADIO	<input type="checkbox"/> INTERNET	<input type="checkbox"/> FRIEND/RELATIVE	<input type="checkbox"/> OTHER _____

Send application and remittance to:

Camp Challenger  
Challenger Learning Center of Tallahassee  
200 South Duval Street  
Tallahassee, FL 32301  
FAX: (850) 645-7784  
sreaves@ChallengerTLH.com

YOU WILL RECEIVE CONFIRMATION VIA EMAIL  
IN 3-5 BUSINESS DAYS FROM THE DATE YOU  
SUBMIT YOUR **CHILD'S** CAMP APPLICATION

MEDICAL HISTORY & CONSENT FORM

Camper's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent's Emergency Contact Number: \_\_\_\_\_ Work Phone: \_\_\_\_\_

1. If reasonable attempts to contact me at the above numbers have been unsuccessful, I hereby give my consent for the administration of any treatment deemed necessary by:

Dr. \_\_\_\_\_, preferred physician at \_\_\_\_\_ (telephone #) or

Dr. \_\_\_\_\_, preferred dentist at \_\_\_\_\_ (telephone #) or

in the event preferred practitioner is not available, by another licensed physician or dentist.

2. I desire my child to be transferred to: \_\_\_\_\_

(preferred hospital or any hospital reasonably accessible). This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists have concurred in the necessity for surgery.

3. Please list any facts concerning the **child's** medical history, any physical impairments or conditions, and medications currently taken to which a physician and the Camp should be informed.

A. History (include allergies)

B. Physical impairments or conditions

C. Medications currently taken. If your child will need medication during the camp session, a parent, guardian, or medical professional must be available to administer the medication. CLC Staff will not administer medication to your child.

*\*Attach any additional documentation to this form if necessary.*

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian

MEDIA RELEASE

This is to certify that I, \_\_\_\_\_, give permission to the Challenger Learning Center, Florida State University and Florida A&M University to photograph and/or videotape for use on their website, social media, promotional brochures or during a local newscast or print interview. I understand that all rights, title and interest in the photography used belong to the Challenger Learning Center, Florida State University and Florida A&M University and that I will receive no financial compensation for the use of these pictures and/ or videotape. I further understand that the above agencies may edit, copy, alter, or revise the photographs and/ or videotape for use on their website(s), promotional brochures, social media or during a local newscast or print interview and that the above agencies will retain control over the use and distribution of the photographs and/or videotape. I have read this form and I understand its meaning.

Printed Name of **Child's** Parent or Guardian

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian

LIABILITY RELEASE

I, \_\_\_\_\_ hereby grant my child, \_\_\_\_\_ permission to attend the Challenger Learning **Center's** Camp, and release the camp manager, camp director, Florida State University, Florida A&M University, instructors, employees, sponsors and the Challenger Learning Center of any and all liability connected with his/her attendance.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian

POLICY ACKNOWLEDGMENT

I have read and understand the additional information, including the policy on cancellations/refunds.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_