

# Camp AFRICA! 2015 SUMMER CAMP REGISTRATION

| *Name   |   |                          |                  | _ Name Called        |             |  |
|---|---|--------------------------|------------------|----------------------|-------------|--|
| *Address  | Last                                      | First                    |                  |                      | _/          |  |
| Street  | t   | Apt #                    | City             | State                | Zip         |  |
| *Date of Birth  | /_  |                          | Male Female Scho | ool Grade as of June | 2015        |  |
| T-Shirt Size Child S M L XL Adult S M (please circle one)                               |   |                          |                  |                      |             |  |
| Primary Email Address for Contact   |   |                          |                  |                      |             |  |
| *Custodial Parent/Guardian Name   |   |                          |                  |                      |             |  |
| *Day Phone Evening Phone  |   |                          |                  |                      |             |  |
| *Cell Phone   | Cell Phone Email (frequently used please) |                          |                  |                      |             |  |
| Second Parent/Guardian Name   |   |                          |                  |                      |             |  |
| Day Phone   |   |                          | Evening Phon     | e                    |             |  |
| Cell Phone  |   |                          | Email            |                      |             |  |
| Alternate Eme   | ergency (                                 | Contact Per              | rson             |                      |             |  |
| Relationship to Camper  |   |                          | Day Phon         | e                    | <del></del> |  |
| Night Phone   |   |                          | Cell Phone       | e                    |             |  |
| Please register your child for the preferred session. Select one session only, please.: |   |                          |                  |                      |             |  |
| Session Date  | es: July 1                                | 13 – July 17             | <b>7</b> th      |                      |             |  |
|   | July 2                                    | 0 – July 24 <sup>1</sup> | th               |                      |             |  |
|   | July 2                                    | 7 – July 31              | st               |                      |             |  |
|   | Aug 3                                     | – Aug 7 <sup>th</sup>    |                  |                      |             |  |
|   |   |                          |                  |                      |             |  |

Aug 10 - Aug 14th

## Please choose child's arts focus (Please circle one only):

Visual Arts

Dance

Debater (Acting)

Scientific Expert

### Does the camper have any special, physical, medical or behavioral needs? Yes No

If yes, please contact Dr. Sibrina N. Collins Director of Education 313-494-5813 to ensure we properly prepare for your child.

# CAMP Africa! STATEMENTS of AGREEMENT

| STATEMENT   | S of AGREEMEN I   |
|---|---|
| Today's Date  |   |
|   | enthusiasm, trying to give my best. I promise to obey the rules, d safety for all including no bringing toys, electronics [Leapsters, ing.  |
| Signature of Camper   | Date  |
| later than 3:15 p.m. and I further agree to pick my I give permission for my child to participate in the ain performance programs.  I permit my child to leave the grounds of the C personnel for approved out-of-camp activities; to approved drivers for camp approved activities.  I give permission for the use of photographs and v by my camper to be used in publicity including the CAMP Africa and the Museum. | activities of CAMP Africa recognizing there is an element of risk charles H. Wright Museum, accompanied by authorized camp be transported in camp approved vehicles, driven by camp ideo including my camper or articles written a Museum website and internet sites promoting or reporting on the emergency medical attention and seek emergency medical |
| Paront's or Guardian's Signaturo  | Date  |

Parents, you must fax the completed registration forms (with signatures and date) to (313) 832 – 8195 by July 7, 2015.

# Summer CAMP Africal 2015

# PARENTS ORIENTATION

All parents must attend an orientation to receive key information about expectations and plans for the weekly camps on the Saturday prior to the campers attending the camp.

Sat, July 11

Sat, July 18

Sat, July 25

Sat, Aug 1

Sat, Aug 8

#### Sample Schedule for the week:

The CAMP Days Schedule -

## Monday-Thursday

- 8:00-8:30 Arrival & Morning snack (Provided by Parents)
- 8:30-9:00 Ice Breaker/Morning affirmations
- 9:15-11:30 Academic Sessions (Science and Literacy)
  - Historic facts activities
  - Interactive/Demonstration
- 11:30-12:30 Lunch/recess (Lunches provided by Parents)
- 12:45-3:00 Practicum-Students break into their respective areas/fields and practice the portion of their program that encompasses the information they have learned for the day.

#### Friday

Morning: Rehearsal and Preparation for STEAM Fair

Afternoon: Celebration and Rest

3:00 - 4:00 PM Science Fair (Parents, family and community Welcome)

4:15 - 5:00PM Presentation

# WELCOME to Summer CAMP AFRICA! (Ages 7 – 12)

# Your child will:

- Learn that Africa is a continent comprised of diverse cultures and experiences.
- Participate in hands-on STEAM (science, technology, engineering, arts and mathematics) activities focused on the topic of healthy habits.
- Develop artistic and performance skills in the areas of visual arts, dance, vocabulary (literacy), and playing the role of scientific experts and debaters. Students must choose from one of the artistic disciplines for the week.

# WELCOME to CAMP AFRICA! Do you want to do some fun science stuff??

# You will:

- Build a molecule of DNA!
- Perform a dance about science!
- Play the role of a science expert!
- Team up with other campers to explore the inventions of others!



# CAMP AFRICA 2015

#### Basic Rules:

#### **Attendance**

Attendance is critically important to the success of your young artist and the program.

Because each session lasts for just 5 days, it is necessary that the students attend every day of the session.

Barring unforeseeable emergencies and illness, we ask that parents ensure their young artist is in attendance and on time every day.

#### **Behavior**

Golden Rule: Treat others as you would want to be treated.

Use a Museum voice when outside the classroom areas.

Always walk through hallways.

Remain in your designated area.

Respect others and listen to your fellow young artists.

Use respectful language at all times.

We may not all make friends but we are all a team. Include your fellow camper.

No electronics-That means no I-Pods, Mp3s.

Absolutely no fighting.

#### **Breakfast, Lunch and Snacks**

We don't provide breakfast, lunch or snacks for the Camp. Children should have a healthy breakfast before they arrive for the camp. Lunch and snacks must be provided by the parents.

We have a strict NO SHARE policy: this way, students with allergies or food restrictions are not accidentally endangered as the result of a friendly gesture.

Also we have a no NUT policy as many children are severely allergic and respond to the mere smell of nuts. So sorry parents, no peanut butter and jelly.

#### Pick up & Drop off

Parents, please come inside to sign your child in for the day. They are big kids, however this is big place and we want to make sure that they are placed in the right hands when they arrive.

Students will not be allowed into the building before 8:00 a.m. so please do not arrive before that time.

Parents will enter at the Warren entrance.

CAMP Africa does not provide after camp care services. Children must be picked up promptly at 3:15 and no later than 3:30. We will do our best to ensure that all activities are completed by then and ask that the time of each educator and artist instructor is also respected.

| Attire  | Day of the STEAM Fair  |  |
|---|--|--|
| Young artists should dress in layers as the building can sometimes be cool.       | Young artists are to wear all black: no wording on the shirts, sparkles or symbols and no jeans or skirts [as they restrict movement]. |  |
| Please no short shorts.   |  |  |
| T-shirts must cover the entire torso.   |  |  |
| No skirts, as the students will move frequently and need to move freely at times. |  |  |
| Closed toe shoes are preferred if they have them.                                 |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |