

# Summer Camp Creation 2024

## Half Day | Ages 3-6

This is a week long, 9am-12pm program especially designed for our younger artists!  
Up to 10 Students per class.

<b>Week #:</b>	<b>Start Date:</b>	<b>Project:</b>
HD#1	June 17th - June 21st	Famous ArtistÁ
HD#2	June 24th - June 28th	Pirates & Princesses
HD#3	July 8th - July 12th	Animals Everywhere
HD#4	July 15th - July 19th	Silly Messy Projects
HD#5	July 22nd - July 26th	Outer Space
HD#6	August 5th - Aug 9th	Around the World
HD#7	August 12 - Aug 16th	Under the Sea

Each week will consist of projects related to the theme of the week and include story and snack time.  
Parents should remember that we use all sorts of materials.  
Campers should wear clothes and shoes that can get dirty.

## Student Exhibition:

There will be an exhibit of artwork created during Summer Camp Creation.

More details will develop as the summer progresses.

Fee: \$230 / week includes all supplies.

- Payment in full is required with registration
- Due to scheduling, popularity and the structure of this camp, fees are not refundable.\*\*

\*\*Extreme hardship cases will be addressed.

## Early Drop off and Late Pick-Up

AM Extension Hours: Before 8:45 am; Early drop-off Fee: \$15/day  
Optional: "Lunch with the big kids, one day only" Extension till 1:30 pm \$20/  
day. Froyo after lunch (optional) \$5.00 in cash/day

12 Main Street, New Milford, CT 06776 | 860.354.4318 | villagecenterarts.org

## Summer Camp Creation 2024

**3 – 6 Years Old. Weekly Half-Day AM Program. 9:00am – 12:00pm.**

Please fill out form completely.

**Check Week(s):**

HD #1 June 17th                      HD #2 June 24th                      HD #3 July 8th                      HD #4 July 15th  
 HD #5 July 22nd                      HD #6 August 5th                      HD #7 August 12

Student's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Street Address: \_\_\_\_\_ Town: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Birthday: \_\_\_\_\_

E-Mail (please write clearly): \_\_\_\_\_

Student Primarily Lives With: (Check all that apply):    Parent(s)    Sister(s)    Brother(s)

Parent: \_\_\_\_\_ Cell Ph: \_\_\_\_\_  
                     First & Last Name    Daytime Ph: \_\_\_\_\_

Parent: \_\_\_\_\_ Cell Ph: \_\_\_\_\_  
                     First & Last Name    Daytime Ph: \_\_\_\_\_

Emergency Contact other than Parents:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

***In order for your child to have a successful camp week, please inform us of if your child has any conditions that may affect their ability to process instructions. Your child may need a care-giver to accompany them to camp. Please call prior to registration to discuss your individual case with the instructor. Please make us fully aware of any medications your child takes daily and/or may need during the camp day and attach specifications to this sheet.***

Allergies:

Circle all allergies that apply:    Bees    Peanuts    Dairy    Cats    Dogs    Pollen    Other: \_\_\_\_\_

Degree of Severity: Mild    1    2    3    4    5    6    7    8    9    10    Critical  
 (Check One)

Special Remedies required: (i.e. Epi-pen) \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

# Parental Consent Form

In the event of an emergency and I cannot be reached, I hereby give my permission for Village Center for the Arts (VCA) Instructor or their staff to obtain treatment for my child. I hereby authorize any health care provider to rely on this consent for treatment for my child. I give permission for treatment provided by EMTs and by staff trained in first aid.

I give permission and understand that VCA Instructors, their staff, or emergency services will provide transportation to New Milford Hospital. I agree to hold harmless, the Village Center for the Arts, its agents, employees and independently contracted instructors, against and from all liabilities, claims, costs, charges, and the like, due to any injury to my child, and/or treatment arising from my child's participation.

SIGN: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Parent Signature)

Please Answer: How did you find out about VCA's Summer Camp Creation?

Due to the rising costs of credit card processing, we ask that you consider paying with cash or check.

Make checks Payable & Mail to: VCA, 12 Main Street New Milford, CT 06776

OR MC / Visa: # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

AMEX: # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Exp Date: \_\_\_ / \_\_\_ CCV: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Home Zip Code: \_\_\_\_\_

I, \_\_\_\_\_, allow my child, \_\_\_\_\_,

(Parents printed name) \_\_\_\_\_

(Child's printed name) \_\_\_\_\_

to walk to the Village Green after snack break daily. I understand my child will be accompanied at all times by VCA staff personnel.

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

By signing, I authorize Village Center for the Arts to record on video tape, photography, voice recording, or interview through print or other media, my child's first name, voice, image, artwork, and or performance for informational programs, reports, and promotional materials to be used for non-commercial purposes. I understand that neither my child nor I will receive compensation for this appearance and no private individual will receive compensation of any kind as a result of broadcasting this material.

[villagecenterarts.org](http://villagecenterarts.org)