

Please return to your Center Director by March 16th



South Shore Day Camp 2018 Summer Camp and Fall Enrollment

Parent Information

Name: _____

Email address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Child Information

Name 1: _____ **Current grade:** ____ **School (September '18):** _____

*Please check **ALL** boxes that apply:*

- I would like my child enrolled in the Summer Camp.
- I would like my child enrolled in the Before School Program in the fall (**Randolph Only**)
- I would like my child enrolled in the After School Program in the fall.
- My child will be leaving South Shore Stars as of June _____ and will no longer need care.

Name 2: _____ **Current grade:** ____ **School (September '18):** _____

*Please check **ALL** boxes that apply:*

- I would like my child enrolled in the Summer Camp.
- I would like my child enrolled in the Before School Program in the fall (**Randolph Only**)
- I would like my child enrolled in the After School Program in the fall.
- My child will be leaving South Shore Stars as of June _____ and will no longer need care.

Name 3: _____ **Current grade:** ____ **School (September '18):** _____

*Please check **ALL** boxes that apply:*

- I would like my child enrolled in the Summer Camp.
- I would like my child enrolled in the Before School Program in the fall (**Randolph Only**)
- I would like my child enrolled in the After School Program in the fall.
- My child will be leaving South Shore Stars as of June _____ and will no longer need care.

Name 4: _____ **Current grade:** ____ **School (September '18):** _____

*Please check **ALL** boxes that apply:*

- I would like my child enrolled in the Summer Camp.
- I would like my child enrolled in the Before School Program in the fall (**Randolph Only**)
- I would like my child enrolled in the After School Program in the fall.
- My child will be leaving South Shore Stars as of June _____ and will no longer need care.



South Shore Day Camp 2018 Enrollment

Parent Name: _____

Child Name (s): _____

Please check each session that your child(ren) will attend camp. Sessions are available on a first come first serve basis.

Session #1 July 2nd – July 13th (closed July 4th)

Session #2 July 16th - July 27th

Session #3 July 30th - August 10th

Session #4 August 13th – August 24th

I will need extended care at the following site:

Atlantic After Camp
4:30 – 6:00PM

St. Mary's After Camp
4:30 – 6:15PM

Weymouth After Camp
4:30 – 6:00PM

My child has a voucher/income eligible slot

Please note that all previous balances must be paid in full before camp begins.

1st child: Total # of sessions chosen () x \$390.00 per session	= \$ _____
2nd child: Total # of sessions chosen () x \$350.00 per session	= \$ _____
Transportation: \$90 per session per child	= \$ _____
Extended Care (If chosen): \$50 per session per child	= \$ _____
Total Due	= \$ _____

We will not refund for sessions chosen but not used. Exception will be made for medical reasons supported by physician's note.

[A one week non-refundable deposit is due with this agreement \(to be applied to the last session's camp fee\).](#)

Amount enclosed: _____ Check# _____

Credit card payments can be made on our website www.southshorestars.org

Parents Signature : _____ Date : _____

Make Payable to: South Shore Stars
200 Middle Street
E. Weymouth MA 02189

South Shore Day Camp

2018 Transportation Information

These are **TENTATIVE** routes based on last year and this year's projections. Final routes will be sent in mid June. Changes may be 15 minutes per stop but you can switch to another stop on your route. After the first week of camp times should remain consistent. Bus monitors are instructed not to leave a stop until the designated time.

It is our policy not to drop a child off at a stop without a parent to meet them unless we have written permission. If you would like to have your child left off alone at a stop please indicate on the attached form.

Without written permission, we will not drop a child off unattended at his/her stop. We cannot have vehicles waiting at the stop for late parents. Your child will be driven to the nearest Stars Extended Care Location where staff will attempt to reach an emergency contact. Parents will be charged a late fee of \$25.00 if this occurs.

Buses leave camp at 4:00 PM. Drop-offs begin at approximately 4:30 and finish at approximately 5:30 PM. Drop-off times should remain consistent after the first week, depending on traffic problems.





South Shore Day Camp 2018 Transportation

Child's Name: _____

Bus Pick-up (AM): *(select choices from next page)*

	Stop Name
First Choice:	
Second Choice:	

****You must have a second choice. Please be sure that it is a different Bus # than the first choice.***

Bus Drop-off (PM): *(please check one)*

- I will meet my child at his/her pick-up site.
- I will meet my child at a different location (same Bus#)_____.
- I give permission for my child to walk home unattended from his/her pick-up site.
- I would like my child dropped off at an Extended Care Site. **(select below)**
 - Quincy – Atlantic
4:30 – 6:00PM
 - Randolph – St. Mary's
4:30 – 6:15PM
 - Weymouth
4:30 – 6:00PM

I give my permission for my child to be released from the program at the end of the day as described above, and/or to the following people. These people will also be contacted in an emergency, in the order listed, in the event parents or guardians can not be contacted.

Name:		Relationship:	
Address:		Telephone #:	
Name:		Relationship:	
Address:		Telephone #:	
Name:		Relationship:	
Address:		Telephone #:	

Any other transportation or release requests must be stated in writing and maintained in the child's file. Your child will not be released to anyone not listed on this form without prior consent, preferably written. In the event that a parent can not be reached to confirm permission of an unauthorized person to pick up a child, staff may try to obtain permission from emergency contacts listed above.

Parent's Signature

Date

South Shore Day Camp - 2018

TENTATIVE Transportation Routes (Based on last year's enrollment)

FINAL TRANSPORTATION ROUTES WILL BE MAILED OUT IN JUNE.

<p>QUINCY AM Pick-up</p> <p>7:30 Quincy High School (back of school near tennis courts)</p> <p>7:45 Lincoln Hancock School (parking lot on Water Street)</p> <p>Quincy Atlantic After Camp PM only Union Congregational Church 135 Rawson Rd. (617) 328-1572 After Camp closes at 6:00pm</p>	<p>PM Drop-off</p> <p>4:50</p> <p>4:40</p> <p>5:00</p>	<p>QUINCY AM Pick-up</p> <p>7:45 Parker School (Front of building)</p> <p>7:55 Bernazzani School (Front of building)</p> <p>Quincy Atlantic After Camp PM only Union Congregational Church 135 Rawson Rd. (617) 328-1572 After Camp closes at 6:00pm</p>	<p>PM Drop-off</p> <p>4:55</p> <p>4:40</p> <p>5:00</p>
<p>WEYMOUTH AM Pick-up</p> <p>7:30 Abigail Adams (Front of building)</p> <p>7:40 Pingree School (Front parking lot)</p> <p>7:55 Joseph Fern Court/Lake Street (Corner)</p> <p>Weymouth After Camp PM only 200 Middle Street (781) 331-3685 After camp closes at 6:00pm</p>	<p>PM Drop-off</p> <p>5:05</p> <p>5:00</p> <p>4:45</p> <p>4:55</p>	<p>WEYMOUTH AM Pick-up</p> <p>7:55 Nash School (Front of building)</p> <p>7:30 Seach (Front of building)</p> <p>7:45 Weymouth High School (Front of the Gold building)</p> <p>Weymouth After Camp PM only 200 Middle Street (781) 331-3685 After camp closes at 6:00pm</p>	<p>PM Drop-off</p> <p>4:50</p> <p>4:55</p> <p>4:45</p> <p>5:05</p>
<p>RANDOLPH AM Pick-up</p> <p>7:30 Martin Young School (Back parking lot)</p> <p>7:40 Randolph High School (Parking lot on the left side of the building)</p> <p>7:45 St. Mary's School (Front parking lot)</p> <p>St. Mary's After Camp 30 Seton Way 781-963-1588 After camp closes at 6:15pm</p>	<p>PM Drop-off</p> <p>5:00</p> <p>4:50</p> <p>4:40</p>	<p>RANDOLPH AM Pick-up</p> <p>7:45 St. Mary's School (Front parking lot)</p> <p>7:55 Donovan School (Front of building)</p> <p>St. Mary's After Camp 30 Seton Way 781-963-1588 After camp closes at 6:15pm</p>	<p>PM Drop-off</p> <p>4:50</p> <p>4:40</p>

You can switch to another stop on your route. A phone call is not necessary but please tell the bus monitor. Please allow 10 minutes on either side of the pick-up and drop-off times for the first week of camp. The times should stay relatively consistent after that depending on traffic.



South Shore Day Camp

2018 Swim Form and Field Trip Permission

Dear Parents/Guardians:

Annually, at no extra cost to you, South Shore Day Camp offers swim instruction given by American Red Cross Certified Instructors. The ability to swim is an important skill and we encourage parents to take advantage of this opportunity.

If you decide you would like your child to participate in swim, they will be required to attend the swim period designated for their group. If, for some reason, they do not wish to swim on a certain day, they will be allowed to remain on the beach. Please discuss this option with your child as we will not force participation in this activity. ***If you select swim, please be sure to send a bathing suit and towel each day.***

Thank you,

Camp Director

SWIM

Please indicate below if you want your child to participate in the swim instruction:

Name 1: _____	Age: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name 2: _____	Age: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name 3: _____	Age: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name 4: _____	Age: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>

FIELD TRIPS

Throughout the summer we provide a variety of field trips which may include going to: the zoo, museums, sporting events or roller skating. If you want your child to be able to participate in field trips, please indicate below:

Name 1: _____	Age: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name 2: _____	Age: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name 3: _____	Age: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name 4: _____	Age: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Parent's Signature: _____ Date: _____