



Agape Learning Center
Summer Camp Enrollment Packet

Designed to enrich your children's 5-12 mind, body, and spirit.

WELCOME to the Agape Learning Center 2021 Summer Camp Program!!!

Registration begins NOW!!! Operating dates: **Start June 14th, 2021 to August 13th, 2021.**

Enrollment packets are available from the website at www.agapeworship.org. You may also get a packet from the Agape Worship Center Information Desk. Applications are on a **FIRST COME/FIRST SERVE basis.**

Please submit the following with your completed registration packet.

First week (\$85) must be paid in full at registration.

- Payment is due the Friday before the week of services.
- **If you are behind 1 week of payment, your child will not be rendered services.**

Registration forms may be submitted at:

Agape Worship Center, Administration Office between 10AM – 4PM
Agape Learning Center 803-454-2373 ext. 691 between 8:00 AM – 5:00 PM
E-mail: Info@agapeworship.org
Church Telephone: 803.454.2373 ext.101 Tues-Fri. 10am-4pm.

Summer Camp hours:

6:30 a.m. to 5:30 p.m. (Doors open)

5:30 p.m. to 6:00 p.m. (Late afternoons pick-up)

REGISTRATION: Onsite registration is **\$50**, and the weekly fee is **\$85/wk. per child (2) or more children from the same family \$85/wk. and for the third child \$75/wk.** Fee can be paid in full all at once or on a weekly basis. The weekly fee must be paid in a timely manner in order to remain in the program.

ENROLLMENT/EMERGENCY MEDICAL FORM

Child's Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Number: _____

Second Contact Number: _____

School Attended: _____ Grade in Fall 2021 Age: _____

Sex: _____ F _____ M _____

Parent Email Address: _____
(Please print clearly)

EMERGENCY CONTACT INFORMATION (Please contact the Program Coordinator, in the event your emergency contact information changes, it is extremely important that we have current and correct information on file).

Parent/Guardian Name: _____

Home Phone: _____ Cell: _____ Work: _____

Emergency Contacts

1) Name: _____ Relationship to child: _____

Home Phone: _____ Cell Phone: _____ Work: _____

2) Name: _____ Relationship to child: _____

Home Phone: _____ Cell Phone: _____ Work: _____

DISCLAIMER NOTICE

Please read the following agreement before signing. Although camp participation is encouraged, it is encouraged only if health & safety are considered.

Name of Student: _____

Please print.

*I have seen the Agape Learning Center, Church of God / Columbia SC grounds and hereby give permission for my child to use all the facilities including community parks and recreation grounds. I hereby find them safe and suitable for my child.

_____ (initial)

*I understand a risk of participation in any sports, including Agape, After School Program, is the risk of the injury, including but not limited to serious permanent injury. To minimize the risk of injury, I agree to tell my child to obey all safety rules and to report fully any problems related to his/her physical condition to summer camp staff as soon as the problem begins.

_____ (initial)

*I certify that my child is medically cleared to take part in physical sports, is fully immunized and physically and mentally able to take part in all physical activities of the program.

_____ (initial)

*I certify that my child's medical records are complete, on file as required by their school district. I certify that my child is covered by a health insurance policy and I agree to handle any hospitalization or other required treatment.

_____ (initial)

*I understand that my child will be transported to/from all field trips in privately owned vehicles or church van and hereby release Agape Learning Center, Church of God / Columbia SC, its board of directors, camp directors, employees, or volunteers of any and all liability that may occur at the church, during any athletic activity, or during any optional field trip or outing. _____ (initial)

By signing below, I certify the following:

- That my child is not currently under the care of a physician for an injury, illness or mental health condition that would prevent his/her safe participation in the after-school program.
- That my child is not currently being treated for or recovering from an injury that would prevent his/her safe participation in the Summer camp program.
- That my child has no history of fainting or other problems related to strenuous activity.
- That my child is in good health and there is no reason he/she cannot safely take part in strenuous physical activity.
- That this disclaimer form has been reviewed, explained and I was given an opportunity for clarification by Agape Learning Center.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

PARENT RELEASE FORM

I give permission for the people listed below to pick up my child. _____
Name of Child

From Agape Learning Center Summer Camp Program.

NAME	RELATIONSHIP	TELEPHONE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Parent/Guardian's Signature: _____ Date: _____

Parent/Guardian's Signature: _____ Date _____

STUDENT'S CODE OF CONDUCT

The Code of Conduct is to be signed by the student and parent(s). Our goal is to ensure the safety and enjoyment of each student. Parents, please review the Code of Conduct with your child BEFORE the program begins so they fully understand the expectations. It is the parent's responsibility to discuss any behavioral concerns with the learning center staff BEFORE enrolling your child in the program. If your child does not follow the rules, they may be subject to removal from the program with NO REFUND given.

CHILD'S NAME: _____

Please print.

As a student, I am expected, and I will:

- Show respect to staff, visitors, and other students.
- Cooperate fully with staff instructions.
- Follow the rules of the program and be responsible for knowing the rules.
- Respect the rights and opinions of others and show courtesy.
- Not use cursing, teasing, name calling, obscene gestures, yelling with my peers or staff.
- Will not cause injury, bodily harm or rough play to other students or staff. This includes pushing, kicking, hitting, or fighting which are not acceptable and will not be tolerated.
- Respect the property of other students.
- Use program equipment properly and will not intentionally damage equipment. This includes breaking playground toys and board games. I understand that if I do, my parents may be requested to pay for the damages.
- Take responsibility for my actions and understand that irresponsible behavior will result in disciplinary action.

Student's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____