



# Camp HDS

## SUMMER CAMP AT A GLANCE

<p><b>July 5-8</b> <b>Time Travelers</b></p> <ul style="list-style-type: none"> <li>• Field Trip: Medieval Times Dinner and Tournament (lunch included)</li> <li>• Skyzone Trampoline Park</li> </ul>	<p><b>July 11-15</b> <b>Resort</b></p> <ul style="list-style-type: none"> <li>• Field Trip: Jellystone Park: Water park, mini golfing, jumping pillow, pedal carts, playgrounds</li> <li>• Ultimate Adventure Obstacle Water Slide (on site)</li> </ul>
<p><b>July 18-22</b> <b>Campers Choice Awards</b></p> <ul style="list-style-type: none"> <li>• Field Trip: Dutch Wonderland Amusement Park</li> <li>• Bounce Party and Play</li> </ul>	<p><b>July 25-29</b> <b>Hands On!</b></p> <ul style="list-style-type: none"> <li>• Field Trip: Delaware Children's Museum</li> <li>• Swimming at Conowingo Pool</li> <li>• Special Guest</li> </ul>

**Time Travelers**

Each day, during this four day camp, you will travel through the Camp HDS Time Capsule into a different time era. This week is packed with entertainment as you discover life as a caveperson, build your Middle Ages castle, celebrate the now, and jump into the future!

**Resort**

Campers, get ready to visit a different themed resort, every day of the week. We will enjoy all the activities and amenities of the Caribbean Resort, Campground Resort, Mountain Resort, Ranch Resort, and Ultimate Adventure Resort.

**Campers Choice Awards**

Roll out the red carpet for the best of the best Camp HDS activities! You are the star and the votes are in to celebrate your favorite themes, games, and field trips. You will be amazed at all the fun we can have in one week. Come dressed to the nines because this week concludes with a most epic award party!

**Hands On!**

Ever wonder how they make that? You will discover and investigate through hands on science experiments, games, and art activities. This week will bring out your inner scientist as you grow, create, and learn new skills in the areas of environmental and food science.

**HOURS:**

Before Camp Care 7:30 a.m. -9:00 a.m.	Camp Day 9:00 a.m. -3:00 p.m.	Unlimited Hours 7:30 a.m. -6:00 p.m.	After Camp Care 3:00 p.m -6:00 p.m.
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For more information, contact Karen Brown, karenbrown@harfordday.org or (410) 809-2390

# GENERAL INFORMATION



## MISSION

The mission of Camp HDS is to enrich the emotional, social and physical life of each camper while incorporating educational activities and skills through hands-on experience. We promote team-building activities and strive to create an atmosphere where campers feel a sense of unity and confidence. Camp HDS's staff is committed to ensuring each camper's safety, while promoting a fun-filled and educational day.

## CAMP HIGHLIGHTS

- Multi-week camps for multiple age groups
- Camp Sessions: July 5-8, July 11-15, July 18-22, July 25-29
- Onsite and Offsite field trips
- Offsite swimming @ Conowingo pool for Dragonflies and Dragons & Conowingo wading pool for Snapdragons
- Travel by bus to all field trips
- Before and After Care
- CPR and First Aid certified staff
- Online registration @ [www.harfordday.org](http://www.harfordday.org)



## SERVICE LEARNING

**Dragon Trainer** (*Rising 6th, 7th*) This program combines your child's favorite camp activities and field trips with an introductory service learning component that focuses on teamwork, leadership, and community service within the camp. All Dragon Trainers will be issued a certificate for their service learning hours.

**Counselor In Training (CIT)** (*Rising 8th-12th*) CIT's will learn responsibility while participating in service learning activities focusing on character building, responsibility, and leadership. Under the teacher's supervision, CIT's will assist with younger camp groups and activity set-up while participating in activities with their peers. Lessons learned as a CIT at Camp HDS are valuable tools for future academic, personal, and professional successes. All CITs will be issued a certificate for their service learning hours. CITs are encouraged to volunteer for at least 2 weeks. *A \$75 per week field trip fee applies to all CITs. All CITs must register online at [www.harfordday.org](http://www.harfordday.org).*

## SUMMER CAMP REGISTRATION INFORMATION

- Campers must be the required age at the time of the camp.
- If you plan to register your child for multiple sessions, be sure to check all sessions on the camp selection page.
- Complete the entire camp registration packet FOR EACH CAMPER. Children will be allowed to attend camp when ALL paperwork is complete.
- Complete the form online or mail your registration papers and payment to:  
**Harford Day School, 715 Moores Mill Road, Bel Air, MD 21014, Attn: Karen Brown**
- A **\$75 deposit** per session is included in each registration and is non-refundable after May 20, 2016.
- All payments must be made at the time of registration.
- Register your child early as camp sessions fill quickly!

For more information, contact Karen Brown, [karenbrown@harfordday.org](mailto:karenbrown@harfordday.org) or (410) 809-2390.

Camper's Name: \_\_\_\_\_



# Camp Registration

	<b>SNAPDRAGONS</b> Rising Kindergarten (3 yrs.) Potty Trained	<b>DRAGONFLIES</b> Rising 1st grade & 2nd grade	<b>DRAGONS</b> Rising 3rd, 4th & 5th grade	<b>DRAGON TRAINER</b> Rising 6th & 7th Grade	<b>CITs</b> Counselors in training Rising 8th - 12th Grade	<b>WEEKLY TOTAL</b>
<b>July 5 - July 8</b>	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$225 <input type="checkbox"/> Before Care \$15 <input type="checkbox"/> After Care \$25 <input type="checkbox"/> Unlimited Hrs. \$265 Total_____	<input type="checkbox"/> Full Day (8:30-3:30) \$75	<b>\$ _____</b>
<b>July 11 - July 15</b>	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$225 <input type="checkbox"/> Before Care \$15 <input type="checkbox"/> After Care \$25 <input type="checkbox"/> Unlimited Hrs. \$265 Total_____	<input type="checkbox"/> Full Day (8:30-3:30) \$75	<b>\$ _____</b>
<b>July 18 - July 22</b>	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$225 <input type="checkbox"/> Before Care \$15 <input type="checkbox"/> After Care \$25 <input type="checkbox"/> Unlimited Hrs. \$265 Total_____	<input type="checkbox"/> Full Day (8:30-3:30) \$75	<b>\$ _____</b>
<b>July 25 - July 29</b>	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$300 <input type="checkbox"/> Before Care \$30 <input type="checkbox"/> After Care \$55 <input type="checkbox"/> Unlimited Hrs. \$365 Total_____	<input type="checkbox"/> Full Day (9-3) \$225 <input type="checkbox"/> Before Care \$15 <input type="checkbox"/> After Care \$25 <input type="checkbox"/> Unlimited Hrs. \$265 Total_____	<input type="checkbox"/> Full Day (8:30-3:30) \$75	<b>\$ _____</b>
<b>TOTAL \$ _____</b>						

**Before Care** begins at 7:30 a.m. • **After Care** ends at 6:00 p.m. • **Unlimited hours** begin at 7:30 a.m., end at 6:00 p.m.  
*Late fees apply after 6 p.m.*

For more information, contact Karen Brown, karenbrown@harfordday.org or (410) 809-2390.

*Fee includes all field trip admission tickets and t-shirt.*



# Registration Form

## CAMPER INFORMATION

Name (and nickname, if applicable): \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex:  M  F

Age at Time of Camp: \_\_\_\_\_ Name of Current School: \_\_\_\_\_

How did you hear about us?  Brochure  Website  Word of Mouth  Sign  Baltimore's Child  
 Returning Camper  Other \_\_\_\_\_

T-Shirt Sizes:  Youth XS  Youth S  Youth M  Youth L  Adult S  Adult M  Adult L

*Sizes can't be guaranteed if registered after May 20th*

## PARENT/GUARDIAN INFORMATION

Name(s) of Parent(s)/Guardian(s): \_\_\_\_\_

Home Address (if different): \_\_\_\_\_

Home Phone: \_\_\_\_\_

Parent/Guardian 1 Work Phone: \_\_\_\_\_ Cell \_\_\_\_\_

Parent/Guardian 2 Work Phone: \_\_\_\_\_ Cell \_\_\_\_\_

Email Address: \_\_\_\_\_

## POLICIES/WITHDRAWALS

I have read and understand the policies, terms, and conditions listed on the Camp HDS information page. By signing below, I also acknowledge that a \$75 non-refundable deposit will be deducted for each session cancelled after May 20, 2016.

Signature (Required): \_\_\_\_\_ Date: \_\_\_\_\_

If the session you selected is filled, would you like to register for a different session?

Yes  No If yes, which session? \_\_\_\_\_

## SCHOOL INFORMATION

Is the camper currently enrolled in Harford Day School?  Yes  No

If no, would you like information about Harford Day School sent to you?

Yes, please send me information about enrolling in Harford Day School.

For more information, contact Karen Brown, karenbrown@harfordday.org or (410) 809-2390.

Camper's Name: \_\_\_\_\_



# Payment

*Please include separate registration and payment forms for each child.*

## AMOUNT DUE

Camp Fees: \$ \_\_\_\_\_

Before Care: \$ \_\_\_\_\_

After Care: \$ \_\_\_\_\_

**TOTAL AMOUNT DUE** \$ \_\_\_\_\_

## AMOUNT ENCLOSED

**TOTAL AMOUNT ENCLOSED** \$ \_\_\_\_\_

**PAYMENT METHOD** (check only one)

- Check enclosed (check(s) payable to Harford Day School)
- Credit Card payment on site

## REGISTRATION CHECKLIST

- I completed all pages of the registration form for each child.
- I enclosed full payment.
- I signed and dated the registration form.
- I signed and dated the emergency release/health form.

For more information, contact Karen Brown, [karenbrown@harfordday.org](mailto:karenbrown@harfordday.org) or (410) 809-2390.



# Emergency Release/Health Form

Please provide information about any medical conditions, medications, psychological conditions, behavioral conditions, dietary restrictions, or special needs that we need to be aware of to ensure that your child's camp experience is a positive one.

Camper's Name: \_\_\_\_\_

## CAMPER'S HEALTH INFORMATION

General health concerns: *(psychiatric, physical, behavioral)* \_\_\_\_\_

\_\_\_\_\_

Allergies\*: \_\_\_\_\_

Medications taken on a regular basis: \_\_\_\_\_

*If necessary, please request the Camp HDS Medication Self-Administration Form (needed for all medications, prescription and non-prescription).*

Other pertinent information: \_\_\_\_\_

I understand that sunscreen (stick and spray), swimsuit and towel are required to be brought daily by each camper.

## \*ALLERGY ACTION PLAN

Common cause of reaction: \_\_\_\_\_

Symptoms of typical reaction: \_\_\_\_\_

Parent's Procedure for typical reaction: \_\_\_\_\_

## CAMPER IMMUNIZATION

The following information is required for a camper to be admitted to camp. All campers must be current on immunizations.

1. Is the camper currently enrolled in a Maryland school, public or private?

YES, provide name of Maryland school: \_\_\_\_\_

NO, provide a copy of immunizations confirming that the child has received all immunizations as required by the Maryland DHMH Recommended Childhood Immunization Schedule. See [www.EDCP.org](http://www.EDCP.org) (Immunization) for information.

2. Is the camper exempt from any immunization on medical or religious grounds?

YES, provide a signed copy of Maryland Department of Health and Mental Hygiene Immunization Certificate from either a licensed physician indicating that the immunization is medically contraindicated, or the parent or guardian indicating that they object to immunizations for religious reasons.

NO



Camper's Name: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION

In an emergency, we will contact the parent/guardian(s). In the event that they can't be reached, please provide the following information:

Physician: \_\_\_\_\_ Physician phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Relationship to Camper: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

## HARFORD DAY SCHOOL'S SUMMER CAMP WAIVER

On behalf of my child I accept and assume any and all risks associated with his/her attendance and participation in the camp and its activities. I understand that my child should not attend the camp if he/she is not healthy. I understand that my child must abide by camp rules and the instructions of the camp staff. I agree that if my child is dismissed from the camp, no part of my camp tuition will be refunded. I understand that no reduction in the fee will be made for late arrival, early departure, vacations, illness, or injury. In the event that I cannot be contacted in an emergency, I hereby grant Harford Day's Summer Camp permission to give immediate treatment and/or have my child transported to a hospital emergency room. Permission is hereby granted for photographs and/or videos to be taken of my child at camp and Harford Day's Summer Camp has the right to utilize these in our brochures, videos, slide shows, website, and other camp materials. I understand that sunscreen (both stick and spray) are required to be brought by each camper. Permission is also granted for my child to be transported by bus for all scheduled camp field trips. Knowing these facts and in consideration of your accepting my child's application, I or anyone acting on my child's behalf, agree that neither Harford Day's Summer Camp nor Harford Day School are responsible for accidents, injuries, and/or medical or dental expenses arising from my child's participation in the camp. In accordance with this agreement, I promise not to sue, and release Harford Day's Summer Camp, Harford Day School, and anyone working on their behalf from all claims of liability or expenses of any kind relating to my child's participation in the camp.

\_\_\_\_\_  
Parent(s)/Guardian Signature

\_\_\_\_\_  
Date

For more information, contact Karen Brown, [karenbrown@harfordday.org](mailto:karenbrown@harfordday.org) or (410) 809-2390.