



## Summer Camp

# WELCOME TO MILL CREEK ACADEMY'S SUMMER CAMP 2018 SENIORS & JUNIORS B

We have planned a calendar of events to ensure a great summer. Following is a list of events along with permission slips that will need to be signed and returned. There are two field trips that will require an extra \$5.00 each. There is an envelope attached for payment if you would like to pay with cash or check, or you can have it added to your account. You have the option of having your child remain at the center if you do not wish to pay the extra fees.

- Please let us know in advance if you do not want your child to attend any of our field trips.
- Your child must be here by 9:00 a.m. on most field trip days.

We welcome parents on all our field trips, however, you must provide your own transportation, as our insurance does not allow parents on the bus. Also, parents will be responsible for any cost associated with the field trips. Mill Creek Academy reserves the right to make changes to the schedule if circumstances dictate (weather, schedule conflicts, etc.) We will post a notice in advance of any changes.

The children will enjoy many field trips throughout the summer. When they are not on a field trip, they will be building, creating, and experimenting in the classroom. Journaling, reading, and math skills will keep their minds going while school is out. Lots of creative activities are planned by our teachers while the children are inside the center.

We will also be using our Gwinnett County Parks System throughout the summer. We will have you sign permission to take your child to all nearby parks through the end of summer giving us the flexibility to hop on the bus and head to the park for some fun whenever we can!! If your child needs to be picked up early from daycare for any reason during the summer, please let someone in the office know so we can make sure not to send them on any afternoon field trips.

In the afternoons your child/children could be rotating in any one of our summer camp classrooms, so for your convenience, we will be using our intercom system to bring your child to the lobby at the end of the day.

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Parent Signature

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Child's Name



“Like” us on Facebook for info on the day's activities in Summer Camp!



### TUITION AND MEALS

The weekly tuition rate for Summer Camp is \$180 per week per child. The daily rate for Summer Camp will be \$45 per day. Family Discounts do apply during this time. Tuition is due on Monday by 6:30 p.m. or on the morning that your child is dropping in for the day. Tuition covers most field trips and all meals.

Mill Creek Academy will serve breakfast, lunch, and an afternoon snack to your child each day. Breakfast is served from 7:00 to 8:25 a.m. **No breakfast will be served after 8:25 a.m.**

Money for video games or movie snacks for certain field trips may be brought by your child. Please do not send more than \$20 at a time. We will not be responsible for lost, stolen, or misplaced money or items that your child brings in for field trips. We will let you know when extra money is needed on field trips. **Please look daily at our dry erase board for the next day's activities.** It will be outside in our front porch area for you to see as you are coming to pick up your child in the afternoon. We will also post the next day's activities on our FACEBOOK page.

### SUMMER CAMP RULES

We ask that you speak to your children about the importance of good behavior. If your child exhibits unacceptable behavior we will contact you. If the behavior continues, it will result in a loss of field trip privileges and possible removal from the center. It is important to us that our children understand the rules for good behavior. Behavior which is of concern to staff and management might include: not following directions in class or on a trip, harassing or bullying peers, any physical aggressiveness towards self or others, using foul language, not following bus rules, etc.

**Electronic devices will be allowed during summer camp, however, Mill Creek Academy will not be responsible for any lost, stolen, or broken items.** We reserve the right to confiscate any items if they pose a problem in our classrooms. Any confiscated items will be kept in the office and returned to parents with the understanding that they will not be brought back into the building. **All items brought into the daycare should be labeled with your child's name/initials.**

Throughout the summer, we will be taking photos of the fun we will be having on our field trips, and at Mill Creek Academy. We will be posting some of these photos on our FACEBOOK page. Please let us know if you do not want your child's photo posted.

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Parent's Signature/Date

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Child's Name



**SUMMER CAMP (Seniors & Juniors B)**  
**FIELD TRIP AUTHORIZATION**

Child's Name \_\_\_\_\_ Today's Date \_\_\_\_\_

<u>DATE</u>	<u>FIELD TRIP</u>	<u>APPROX. TIME</u>
5/30, 7/25	<b><u>SKATE COUNTRY</u></b> 2700 Buford Hwy NE Buford 30518 678-546-1547	<b>10:30-3:00p.m.</b>
6/1,15,29 7/13,27	<b><u>RHODES JORDAN AQUATIC CTR</u></b> 100 E Crogan St Lawrenceville 30046 678-277-0890	<b>11:30-4:30p.m.</b>
6/4	<b><u>ELACHEE NATURE CENTER HIKE</u></b> 2125 Elachee Dr. Gainesville 30504 770-535-1976	<b>9:00-3:00p.m.</b>
6/7	<b><u>GWINNETT STRIPERS GAME</u></b> Coolray Field 2500 Buford Dr. NE Lawrenceville 30043 678-277-0300	<b>11:00-4:00p.m.</b>
6/11,8/1	<b><u>RABBIT HILL PARK</u></b> 400 Rabbit Hill Rd Dacula 30019 678-225-0230	<b>9:00-2:00p.m.</b>
6/14	<b><u>MEDIEVAL TIMES</u></b> 5900 Sugarloaf Pkwy Ste 517 Lawrenceville 30043 770-225-0230	<b>10:00-3:00p.m.</b>
6/18	<b><u>LAKE LANIER AQUATIC STUDY</u></b> Holiday Marina 6900 Lanier Islands Pkwy Buford 30518 770-945-7201	<b>9:00-3:00p.m.</b>
6/20	<b><u>THE FLYING MACHINE FOR LUNCH</u></b> 510 Briscoe Blvd Lawrenceville 30046 770-962-2262	<b>10:00-1:00p.m.</b>
6/25	<b><u>ROCKSPRINGS PARK</u></b> 550 Rocksprings Rd Lawrenceville 30043 678-277-0855	<b>10:00-2:00p.m.</b>
6/27	<b><u>E.E. ROBINSON PARK</u></b> 850 Level Creek Rd Sugar Hill 30518 770-831-7413	<b>10:00-2:00p.m.</b>
7/2	<b><u>TREETOP QUEST</u></b> G.E.H.C 2020 Clean Water Dr Buford 30519 770-904-3500	<b>9:00-3:00p.m.</b>
7/11	<b><u>STARS &amp; STRIKES</u></b> 1601 Horizon Pkwy Buford 30518 678-965-5707	<b>9:00-1:00p.m.</b>
7/18	<b><u>REGAL 14 HAMILTON MILL</u></b> 2160 Hamilton Creek Pkwy Dacula 30019 844-462-7342	<b>9:00-2:00p.m.</b>
7/23	<b><u>CHUCK E. CHEESE</u></b> 1690 Mall of GA Blvd. Buford 30519 770-614-5803	<b>10:00-2:30p.m.</b>

I agree for my child to participate in all of the above field trips. I also give my permission to Mill Creek to seek medical attention for my child in the event of any emergency if I cannot be reached.

\_\_\_\_\_  
Parent Signature



## PARK PERMISSION FORM:

We will be going to some area parks on scheduled days, and also any other time we decide to go and play. Please sign below giving permission for your child to attend field trips to all parks listed below. Parents will be called before any unscheduled park trips.

Bogan Park  
2723 No. Bogan Rd.  
Buford, GA 30519  
770-831-4173

George Pierce Park  
55 Buford Hwy.  
Suwanee, GA 30024  
770-822-5414

Dates: May 24<sup>th</sup> - August 3rd, 2018  
Time: 9:00 a.m. - 3:30 p.m.

Collins Hill Park  
2225 Collins Hill Rd  
Lawrenceville GA  
770-614-2060

Rhodes Jordan Park  
100 East Crogan Street  
Lawrenceville GA 30043  
770-831-4173

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**PARENT SIGNATURE**

Rabbit Hill Park  
400 Rabbit Hill Rd  
Dacula GA 30019  
678-277-0855

Rock Springs Park  
550 Rock Springs Rd  
Lawrenceville GA 30043  
770-822-8840

Suwanee Town Park  
330 Town Center Ave  
Suwanee GA 30024  
770-945-8996

Duncan Creek  
3700 Braselton Hwy.  
Dacula GA 30019  
770-822-8840

E.E. Robinson Park  
850 Level Creek Rd  
Sugar Hill GA 30518  
770-831-7413

Gary Pirkle Park  
6195 Austin Garner Rd  
Sugar Hill, GA 30518  
770-831-7413



Parents,

Please fill out the **top portion** of this form giving permission for us to administer a swim test to your child.

Thanks

Center Name: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Date of Birth (include year): \_\_\_\_\_

I give \_\_\_\_\_ permission to participate in swimming activities.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

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**To be completed by swim instructor**

\_\_\_\_\_ has successfully completed a swimming test which required the child to swim a distance of fifteen (15) yards unassisted.

\_\_\_\_\_ (lifeguard) has current evidence of having completed successfully a training program in lifeguarding offered by a water-safety instructor certified by the American Red Cross or YMCA or YWCA or other recognized standard-setting agency for water safety instruction.

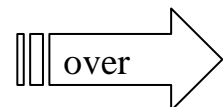
(Center must maintain a copy on file)

\_\_\_\_\_  
**Signature of lifeguard or instructor**

\_\_\_\_\_  
**Date**

Center has obtained a letter from the off-site swimming facility that all lifeguards on duty have successfully completed a training program in lifeguarding.

\*\* In lieu of requiring each child to take a swimming test to determine whether the child can swim a distance of fifteen (15) yards unassisted, center staff may accept copies of certificates or cards from a recognized water-safety instruction organization showing that the child has successfully completed a swimming class which required the child to swim a distance of fifteen (15) yards unassisted.



# VEHICLE EMERGENCY MEDICAL INFORMATION

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Mother's Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Father's Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Person to notify in an emergency and parents cannot be reached:

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

Child's Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Medical facility the center uses - **GWINNETT MEDICAL CENTER**  
Address 1000 MEDICAL CENTER BLVD LAWRENCEVILLE GA 30043 678-442-4382

Child's Allergies \_\_\_\_\_

Current prescribed medication \_\_\_\_\_

Child's special medical needs and conditions \_\_\_\_\_

\_\_\_\_\_

In the event of an emergency involving my child, and if **Mill Creek Academy** cannot get in touch with me, I hereby authorize any needed emergency medical care. I further agree to be fully responsible for all medical expenses incurred during the treatment of my child.

Child's Name \_\_\_\_\_

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

(Parent/Guardian)