CAMPER’S NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 First Last

2020-21 SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_GRADE ENTERING: \_\_\_\_\_\_AGE: \_\_\_\_ BOY ▢ GIRL ▢

CAMPER’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 First Last

2020-21 SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_GRADE ENTERING: \_\_\_\_\_\_AGE: \_\_\_\_ BOY ▢ GIRL ▢

PARENTS’ NAMES:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street City State Zip Code

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HOME PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MOTHER’S CELL PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_WORK PHONE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FATHER’S CELL PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_WORK PHONE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*In case parents cannot be contacted\*\*

Additional information that you would like for Camp JAGS staff to know about your child: (Allergies, Medical Conditions, Family Concerns, etc.)

|  |
| --- |
|  |

**AUTHORIZATION FOR TREATMENT**

In connection with the care of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (NAME OF CAMPER -PLEASE PRINT)

I hereby authorize medical staff and/or the physicians at the nearest Hospital to prescribe such treatment, to administer such anesthetics, and/or perform such medical and/or surgical procedures as may be deemed advisable or necessary in the diagnosis and treatment of my son/daughter or the child named above in case of an emergency. (Selected St. Louis Hospitals, if necessary)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (SIGNATURE OF PARENT OR GUARDIAN)

\*This permission is required by the hospital officials before they will treat any emergency case.

|  |  |  |  |
| --- | --- | --- | --- |
| ***Camp Costs:***

|  |  |  |
| --- | --- | --- |
| **Regular Day Camp Rate:** **$150 per week** | **Day Camp +** **Extended Care Rate:** **$175 per week** |  **Daily rates are as follows:** Day Camp only $30 per day Day Camp + Extended Care  $35 per day |

**\* Please note in 2021 there will be an additional $10 fee for each field trip. The field trip fee is waived for any camper that attends all 5 days in one week.****\* Camp JAGS Discounts may only be applied to weekly rates by a Camp Director.** **SJB Discount:** There will be a 10% discount applied to the weekly rate of each St. John the Baptist School student. Students must be enrolled at St. John’s for the upcoming school year to receive the discount.**Early Bird Discount:** There will be a 10% discount applied to the weekly rate for any week that is paid in full on or before May 28th, 2021 for non-St. John’s students. |

2021 Camp Jags Schedule

* Please check the boxes and mark the days for the weeks that you are registering for, if known.
* You may register now and select your dates and pay at a later time if dates are unknown.
* A weekly google form will also be sent out, if you are unsure of attendance now.
* Please pay the appropriate fee no later than the Friday prior to the week of attendance.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Week** | **Dates** | **Day Camp****9:00 A.M-3:00 P.M** | **Day Camp + Extended Care****7:00-9:00 A.M & 3:00-6:00 P.M** | **Daily Attendance****(Circle)** |
| 1 | June 7-11 | ⬜ | ⬜ | M T W TH F |
| 2 | June 14-18 | ⬜ | ⬜ | M T W TH F |
| 3 | June 21-25 | ⬜ | ⬜ | M T W TH F |
| 4 | June 28-July 2 | ⬜ | ⬜ | M T W TH F |
| 5 | July 6-9\* | ⬜ | ⬜ |  T W TH F |
| 6 | July 12-16 | ⬜ | ⬜ | M T W TH F |
| 7 | July 19-23 | ⬜ | ⬜ | M T W TH F |
| 8 | July 26-30 | ⬜ | ⬜ | M T W TH F |

\*There will be no camp on Monday, July 5th. Weekly camp rate will be prorated on a 4 day week.