

2019 Summer Camp Contract

Camper's Name	Date of Birth
Mailing Address	
School Attended 2018-2019:	
School Attending 2019-2020:	
Parent/Guardian 1 Name	
Email	
Address	
Cell Phone	Work Phone
Parent/Guardian 2 Name	
Email	
Address	
Cell Phone	Work Phone

Alternate/Emergency Contact (at least one required)

Emergency Contact 1 Name	Relationship
Emergency Contact 1 Address	
Emergency Contact 1 Email	Cell Phone
Emergency Contact 2 Name	Relationship
Emergency Contact 2 Address	
	- · · · · · ·
Emergency Contact 2 Email	Cell Phone
	_
Emergency Contact 3 Name	Relationship
	Relationship
Emergency Contact 3 Name Emergency Contact 3 Address	Relationship
	Relationship Cell Phone
Emergency Contact 3 Address	
Emergency Contact 3 Address	
Emergency Contact 3 Address	
Emergency Contact 3 Address Emergency Contact 3 Email	Cell Phone
Emergency Contact 3 Address Emergency Contact 3 Email	Cell Phone
Emergency Contact 3 Address Emergency Contact 3 Email Emergency Contact 4 Name	Cell Phone

SUMMER CAMP CONTRACT TERMS

Pursuant to the receipt and acceptance of the Application for Admission, this **"Summer Camp Contract"** is entered into by and between the Renaissance Montessori Academy, a Colorado nonprofit corporation, (hereinafter: **"RMA"**), and the parent(s) or guardian(s) whose signatures appear below. The parties hereto accept the following terms and conditions governing the camper's enrollment at RMA. I/we understand that this is a temporary enrollment contract. My camper's enrollment at the Renaissance Montessori Academy shall be only during the camps chosen. I further understand that if I have multiple campers, each camper must have their own contract filled out in full.

Tuition rates for each one-week session includes all material costs and one snack per day; lunch and other snacks must be provided by family.

Full Summer Camp Payment is due **with the contract** by check made out to "RMA". Any cancellations or changes must be made on or before Friday, April 26, 2019. A **\$75** cancellation fee will be held for all cancellations including cancellation of after care. If any changes or cancellations are made after Friday, April 28, 2019, the family will forfeit fees already collected.

I/we hereby enroll the above named camper in the following Summer Camps (please choose a week and program hours):

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□ July 1 – 5
               o 4 Full Days No Camp Thursday, July 4
                                                             8:30 am to 3:15 pm
       Please choose any that apply:
               o Before Camp Care
                                                            7:30 am to 8:30 am
               o After Camp Care 1
                                                             3:15 pm to 4:15 pm
               o After Camp Care 2
                                                             3:15 pm to 5:15 pm
□ July 8 – 12
       Please choose one:
               o 5 Full Days
                                                             8:30 am to 3:15 pm
               o 4 Full Days M-Th
                                                             8:30 am to 3:15 pm M-Th
               o 4 Full Davs T-F
                                                             8:30 am to 3:15 pm T-F
       Please choose any that apply:
               o Before Camp Care
                                                             7:30 am to 8:30 am
               o After Camp Care 1
                                                             3:15 pm to 4:15 pm
               o After Camp Care 2
                                                            3:15 pm to 5:15 pm
□ July 15 – 19
       Please choose one:
               o 5 Full Days
                                                             8:30 am to 3:15 pm
               o 4 Full Davs M-Th
                                                             8:30 am to 3:15 pm M-Th
               o 4 Full Davs T-F
                                                            8:30 am to 3:15 pm T-F
       Please choose any that apply:
               o Before Camp Care
                                                             7:30 am to 8:30 am
               o After Camp Care 1
                                                             3:15 pm to 4:15 pm
               o After Camp Care 2
                                                             3:15 pm to 5:15 pm
□ July 22 - 26
       Please choose one:
               o 5 Full Days
                                                             8:30 am to 3:15 pm
               o 4 Full Days M-Th
                                                             8:30 am to 3:15 pm M-Th
               o 4 Full Davs T-F
                                                             8:30 am to 3:15 pm T-F
       Please choose any that apply:
               o Before Camp Care
                                                             7:30 am to 8:30 am
               o After Camp Care 1
                                                             3:15 pm to 4:15 pm
               o After Camp Care 2
                                                             3:15 pm to 5:15 pm
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MEDICAL RELEASE FORM AND EMERGENCY PROCEDURES

EMERGENCY MEDICAL RELEASE:

If medical care is deemed necessary and I cannot be contacted, I authorize Renaissance Montessori Academy ("RMA") staff to act on my behalf in deciding the proper course of action for my camper. This includes but is not limited to permission for RMA to render any emergency medical treatment that RMA staff deem appropriate and/or necessary for the well-being of my camper, including, but not limited to First Aid, CPR, calling emergency ambulance transportation and hospitalization, if necessary.

I understand and agree that any and all actions taken by RMA for the benefit of my camper comes at my cost, including but not limited to, emergency medical treatment or care and ambulance transportation. I promise to hold RMA harmless and indemnify RMA for any and all costs associated with any medical treatment it has deemed necessary and/or appropriate for the well-being of my camper, including, but not limited to, any and all costs associated with emergency room visits, hospital care, and ambulance services.

I specifically release RMA from any and all claims, loss, costs, damage, or expenses arising out of or from the exercise of their discretion in seeking medical treatment on behalf of my camper as RMA may deems necessary and/or appropriate, and also release RMA from any and all claims, losses, costs, damages, and/or expenses associated with any negligent treatment or medical malpractice committed by any medical professional, which I might otherwise pursue against RMA in whole or part, including joint or several liability.

MEDICAL CONCERNS (Please list all medical concerns, use a separate page if necessary):				
ALLERGIES (Please list all allergies):				
	_			
Special Needs				
Has your camper ever been identified as disabled?	YES	NO		
If yes, check any the following that apply to your camper:	;			
□ Learning Disabilities □ Speech Language Behavior Disc	orders Physical	Therapy	□Vision	□Hearing
If yes, what special accommodations or modifications are	needed? (Please ι	ıse a separ	ate page if nec	essary):
Does your camper have an IEP or 504 plan in place?	YES	NO		

If any of the above questions have been answered YES, a meeting with RMA may be required before the camper may begin the program.

Student File: I understand that I need to provide a health appraisal and Immunization record for my child's file. I also understand that I may have additional paperwork required for my child's file to fill out. This includes but is not limited to the Summer Camp Parent Handbook Acknowledgement.

ATTENDANCE PROCEDURES

SIGN OUT: I understand that my camper must be picked up by the time his/her contracted program ends.

Full Day pick up is between 3:15 pm and 3:30 pm After Camp 1 pick up is between 4:15 pm and 4:30 pm After Camp 2 pick up is between 5:15 and 5:30 pm

If my camper is not picked up on time, program staff will attempt to contact me first and then attempt to contact all emergency contacts. I understand that there is a charge if I do not pick my camper up by the above stated times. This charge is **\$30** and will be due by check to RMA prior to the camper returning to the program. All times are assessed according to the clock at the front desk. If a child is not picked up within a half an hour of contracted end time and there has been no contact from parent(s) nor emergency contacts, social services will be called.

I understand that multiple late pick-ups may result in my camper being dismissed from the program.

<u>ABSENCES</u>: I will contact the RMA staff by phoning the mainline of RMA (303-840-6119) to notify them when my camper will be absent from the program. I understand that if my camper's absence is not excused by a parent or guardian, the program staff will attempt to contact me.

<u>UNEXCUSED TARDINESS</u>: I understand that unexcused tardiness is unacceptable. If my camper is repeatedly late without any valid reason or excuse, then RMA will contact a parent or guardian to discuss the issue.

If a camper is dropped off late and the group is away from the center, I understand I will be notified where the camper's group is located, and I will bring the camper to meet the group. If I cannot reasonably bring my camper to the group, my camper will need to return home.

CODE OF CONDUCT

Campers enrolled in the Renaissance Montessori Academy Summer Camp are expected to follow all site specific and licensing specific rules, along with the Renaissance Montessori Academy Summer Camp code of conduct:

- 1: Demonstrate a respect for Renaissance Montessori Academy teachers by listening when teachers are talking and following directions.
- 2: Demonstrate a respect for Renaissance Montessori Academy and school property by treating supplies and materials with care and caution.
- 3: Demonstrate a respect for others, including respecting peer's bodies, thoughts, feelings and beliefs.

As part of the Renaissance Montessori Academy program, we want to ensure that our campers demonstrate positive behavior while they are attending our program. In general, we have a "Three- Strike" policy. Please be aware that under certain circumstances, Renaissance Montessori Academy may dismiss a camper after one strike.

If a camper fails to demonstrate positive behavior, a behavior contract may be given to the camper to complete with the help of the Camp Leader or RMA Administrator. The camper must take the form home so that parents can review the behavior with the camper, sign the contract, and return it to RMA the following program day.

CODE OF CONDUCT: I have read and reviewed the Renaissance Montessori Academy Code of Conduct with my camper. I am aware that any violation of the Code of Conduct may result in my camper being dismissed from the program.

Child Protection

I understand that all staff members of the school are required by law, § 26-6-102, CRS 1973, to report any evidence or knowledge of suspected child abuse or neglect to the County Department of Social Services.

ADDITIONAL RELEASES

<u>SU</u>	NSCRE	EΝ

I hereby give permission to RMA and its employees and agents to allow my Camper to apply sunscreen to him/herself, and to provide assistance if reasonably necessary. I understand that it is my responsibility to provide a sunscreen with a minimum SPF of 30 or higher. Camper may use the sunscreen provided by RMA. The ingredients in the sunscreen can be provided by RMA upon request. I understand that it is my responsibility to apply an eight-hour sunscreen to my Camper prior to bringing him/her to RMA in the morning. RMA staff will allow my Camper to apply sunscreen prior to the afternoon outside time.

Please check one:

- □ My camper will bring their own sunscreen to use each day.
- □ My camper can use the sunscreen RMA provides.

G- RATED MOVIE:

During the course of the Summer, Renaissance Montessori Academy may show G -rated movies and videos in full or as excerpts to enhance the curriculum. Movies and videos along with our hands-on activities such as reading, in-class discussion groups, and research projects, give campers a well-rounded opportunity to discover.

I give my camper permission to view movies and videos during Renaissance Montessori Academy.

If I choose NO, I understand that if a movie or video is being played, my camper may be moved to another room or to join another group during this time.

FIELD TRIPS:

On occasions, campers have the opportunity to participate in field trips away from school premises. On excursions, campers walk or use some other means of transportation. If you sign in the space below, your camper will be allowed to join in these field trips during the 2018 Renaissance Montessori Academy Summer Camp. RMA will send information home before excursions.

I understand the nature of the field trip and that my camper is expected to abide by all Renaissance Montessori Academy regulations during the duration of the field trip.

I hereby give my permission for him/her to participate in the field trips.

Please check one:

YES

NO

If I choose NO, I understand that if my camper's group is going on a field trip, my camper may be moved to join another group for the duration of the field trip. If that is not feasible due to state ratio, group size, or other restrictions, I understand I will be asked to pick up my camper and return them after the field trip.

MEDIA CONSENT:

I hereby grant permission for Renaissance Montessori Academy to take photographs of my child in connection with daily activity, class projects, field trips, or school programs.

(choose one): Yes No

I hereby grant permission, without any liability on the part of Renaissance Montessori Academy, its agents or employees, any photographs taken may be used for internal purposes such as in parent handbooks, newsletters, or reports.

(choose one): Yes No

I hereby grant permission to Renaissance Montessori Academy and any third party partners to photograph, interview, video record and/or audio record my camper for non-profit use. It is my understanding that any photograph, interview, video recording and /or audio recording, or portions of, may be used for public view, including but not limited to television, radio, print media, and internet websites.

I understand and agree that neither I nor my camper will receive any financial remuneration in connection with any interviews, photographs, video recordings, or audio recordings taken of my camper. I understand and agree to release Renaissance Montessori Academy from any future claims for injury, loss or damage of any kind associated with or arising from the used of said photographs, interviews, video recordings, or audio recordings.

Lastly, I agree to not hold Renaissance Montessori Academy responsible for the actions of any third parties in connection with any interviews, photographs, audio recordings, and/or video recordings taken of my camper, including news media organizations.

(choose one): Yes No

If a camper's parents do not sign the media release, RMA will refrain from permitting a camper to be videotaped, interviewed, photographed or voice recorded by any media outlet. However, I understand and agree that I will receive no financial reimbursement in connection with any inadvertent action to "my camper", and I agree to hold Renaissance Montessori Academy harmless for any inadvertent actions.

<u>Child Development Opportunity Authorization – Art:</u> Children use their fingers and potentially their feet in exploration of their world through paint and clay. I understand that this may create a finger or foot print of my child within and viewable on the project.

I hereby grant permission to allow my child to create projects that my involve my child's finger or foot prints.

(choose one): Yes No

LEGAL TERMS

- Entire Agreement and Binding Effect. This Agreement, along with the other documents referred to herein, is the
 final integration of the agreement between the parties with respect to the matters covered by it and supersedes
 any prior understandings or agreements, oral or written, with respect thereto. The provisions of this Agreement
 shall inure to the benefit of, and be binding on, the parties and their successors, assigns, employees, legal
 representatives, heirs, distributes, and transferees.
- 2. <u>Governing Law, Jurisdiction and Venue</u>. This Agreement shall be governed by and construed in accordance with the laws of the State of Colorado applicable to contracts to be performed solely within such state. The District Court of the City and County of Douglas, State of Colorado, shall have exclusive jurisdiction, including in personal, jurisdiction, and shall be the exclusive venue for any and all controversies and claims arising out of or relating to this Agreement.

- 3. <u>Modification, Waiver and Severability</u>. This Agreement may not be modified or supplemented except by written instrument signed by the parties. No waiver of any default or breach of any agreement or provision herein contained shall be deemed a waiver of any other default or breach thereof or of any other agreement or provision herein contained. If any provision or portion of a provision of this Agreement is declared void and/or unenforceable, such provision or portion shall be deemed severed from this Agreement, which shall otherwise remain in full force and effect.
- 4. <u>Attorneys' Fees and Costs</u>. In the event any suit or other action is commenced to construe or enforce any provision of this Agreement, the prevailing party shall be awarded reasonable attorneys' fees and court costs, in addition to all other relief to which such party shall be entitled.
- 5. <u>Counterparts/Electronic Signatures</u>. This Agreement may be executed in one or more counterparts, all of which taken together shall constitute one instrument. A facsimile or other electronic copy of a signature on this Agreement shall be acceptable as and deemed to be an original signature.

My signature below confirms that I have read and understand the terms and conditions of this

Summer Camp Contract, and I agree to all the terms and conditions contained herein.

Parent/Guardian Signature

Parent/Guardian Name	
Parent/Guardian Signature	Date
Parent/Guardian Name	

Date