



Cornerstone Learning Community Camp Down and Dirty 2020



Camp Hours
9 a.m.-5 p.m.

Early Drop Off: 8:30 am



Please join Mr. Chris, Mr. Jeremy, Ms. Julie & Ms. Annmarie as we get down and dirty under the summer sun!

Week One: Monday, June 8-12, 2020

Waterworks

Cost: \$300

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<i>CLC Waterpark</i>	<i>Wakulla Springs</i>	<i>CLC Waterpark</i>	<i>Skyzone & Theatre</i>	<i>Beach</i>
<ul style="list-style-type: none"> ✓ Tie dye & batik t-shirts and bags ✓ Arts & Crafts ✓ Face painting ✓ Jewelry Crafts ✓ Archery ✓ CLC Waterpark ✓ Giant Double Splash Waterslide ✓ Obstacle Courses 	<ul style="list-style-type: none"> ✓ Swimming ✓ Picnic 	<ul style="list-style-type: none"> ✓ Giant Double Splash Water Slide ✓ Obstacle Courses ✓ Slip-N-Slide ✓ Treasure Hunt ✓ Tug-O-War ✓ Shaving Cream ✓ Arts & Craft 	<ul style="list-style-type: none"> ✓ Skyzone ✓ Movie Theatre ✓ Arts & Crafts 	<ul style="list-style-type: none"> ✓ Swimming ✓ Picnic

Week 2: Sunday, June 15-19, 2020

CAMP WEEK!!

Cost: \$350

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<i>Arts & Crafts</i>	<i>Wakulla Springs</i>	<i>Fun Station</i>	<i>Overnight Trip</i>	<i>Overnight Trip</i>
<ul style="list-style-type: none"> ✓ Tie dye & batik t-shirts and bags ✓ Arts & Crafts ✓ Face painting ✓ Jewelry Crafts ✓ CLC Waterpark ✓ Giant Double Splash Waterslide ✓ Obstacle Courses ✓ Amazing Race ✓ Tug-O-War 	<ul style="list-style-type: none"> ✓ Swimming ✓ Picnic 	<ul style="list-style-type: none"> ✓ Arcade ✓ Batting Cages ✓ Safari Train ✓ Go Carts ✓ Delta Strike Laser Tags ✓ Mini Golf 	<ul style="list-style-type: none"> Yogi Bear's Jellystone Park ✓ 60' Water Slide ✓ Lazy River ✓ Pirate-themed Splash Pad ✓ Zero Entry Pool ✓ Down Pour Derby ✓ Campfire & S'mores <i>Cookout</i> 	<ul style="list-style-type: none"> Yogi Bear's Jellystone Park ✓ Putt Putt Golf ✓ Kayaking ✓ Fishing ✓ Gem Mining ✓ Beach Volleyball ✓ Ping Pong ✓ Jump Pad ✓ Horseshoe Pit RETURN TO CLC BY 5PM

Daily Items Needed To Be Brought By Campers:

1. Sunscreen!!
2. Bug Spray
3. Hat
4. Water Bottle
5. Old Shoes
6. Bathing Suit (can be worn)
7. Towel
8. Change of Clothes
9. Bag Lunch with drink
10. Snack

Payments: Please make checks payable to: **Cornerstone Learning Community**. You may drop your check in the lock box by the front office. Please include in the "memo" line of your check "**Camp Down & Dirty**" specify the week. If you have any questions or concerns, please email Ms. Annmarie at asmall@cornerstoneclc.com

[PLEASE KEEP THIS PAGE FOR YOUR RECORDS]

Cornerstone Learning Community
Camp Down & Dirty 2020
Registration
(Thanks for printing legibly)

This is a wonderful experience for all campers. Your child will come home excited, exhausted and ready for another day of fun! Yes! I would like to register my child for Camp Down and Dirty!!!

PLEASE CHOOSE A SESSION

Circle the session you wish to register for

_____ **Week 1: June 8-12**

_____ **Week 2: June 15-19 (Overnight Camp Week)**

PARTICIPANT AND PRIMARY CONTACT INFORMATION

Name of Student: _____ Date of Birth: _____ Age (at the time of Camp): _____

Name you prefer to be called (if different): _____

Name of School: _____ Current Grade: _____

T-Shirt Size (circle one): **Youth:** XS SM MED LG *or* **Adult:** SM MED LG XL XXL XXXL

Name of Parent/Guardian/Primary Contact: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Work Phone _____

Email address you check frequently: _____

Best way to contact you? (Circle one) **Home Phone** **Cell Phone** **Email**

EMERGENCY CONTACTS (Please provide two additional people, different from the parent/guardian listed above, who would automatically be the first person we contact)

First Contact's Name: _____ Relationship: _____

Home Phone: ____ - ____ - ____ Work/Cell Phone: ____ - ____ - ____ ext ____

Second Contact's Name: _____ Relationship: _____

Home Phone: ____ - ____ - ____ Work/Cell Phone: ____ - ____ - ____ ext ____

[PLEASE INCLUDE THIS PAGE IN YOUR APPLICATION]

MEDICAL RELEASE (REQUIRES PARENT'S SIGNATURE):

You have our permission, in the event of an emergency and in case we are unavailable, to authorize any physician, nurse practitioner or medical personnel to examine, interview, test and if necessary, treat my child _____ as they may deem advisable.

Parent/Legal Guardian Name _____ Date _____

Parent/Legal Guardian Signature _____ Date _____

Student Allergies _____

Student Medical Issues _____

Doctor _____ Phone number _____

Insurance Carrier _____ Policy number _____

You need to have this document notarized. Ms. Dee or Ms. Melanie can notarize in the office.
Please wait to sign in presence of a notary – thanks.

Parent Signature _____ Date _____

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____ 20____, by
_____ (name of person acknowledging.)

(Seal)

Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known: _____

OR Produced Identification: _____

Type of Identification Produced: _____

[PLEASE INCLUDE THIS PAGE IN YOUR APPLICATION]