



March 2021

Preschool STEAM-STEM Summer Camp Information

Dear Parents,

Choose one week or two weeks Then choose AM or PM session

Each week will be different activities.

AM session will be the same activities as the PM session

4 & 5-year-olds or child must have graduated a 3-year-old preschool class.

DATES: July 12th - 16th AM 9:00 - 12:00 or PM 12:30 - 3:30

TIMES: July 19th - 23rd AM 9:00 - 12:00 or PM 12:30 - 3:30

We are excited to be able to offer this opportunity for our preschoolers to experience Summer STEAM - STEM Camp.

STEAM = Science-Technology-Engineering - Arts - Math. You also see it as STEM and that is with the Arts left out! SO, we definitely want to do our Arts. The purpose of the summer camp is to engage the preschoolers in activities that are HANDS-ON and developmentally appropriate, and to keep them engaged over the summer. We intend to set a spark to the love of science, technology, engineering, art and math. In other words, FUN and thought-provoking, using critical thinking skills and some days will be MESSY as well!

The possibilities for STEM education are endless. Children love to experiment, combine new substances, build, knock down, collect, sort, and have fun while learning. We also want them to be able to take home their projects every day and talk about it with their parents, and to be able to use the vocabulary and ideas they worked with at camp.

Our camp day will start with the arrival of the campers and a special greeting. Once everyone has arrived, they will be able to choose a center of their choice for free center exploring and play. The teachers will set up the centers to fit with the theme for the week. The children will then engage in guided play, exploring, and scientific learning processes and discoveries.

After free play we will meet on the carpet for a large group activity. This will include songs, dancing, yoga and stories. After carpet time, we will split into small groups and do hands-on activities. The children will rotate through "stations." In each station there will be a variety of activities planned for the week to fit the theme. We will be doing STEM activities including experiments, building, and engineering. Our snacks will be also very hands-on, which the children will enjoy helping to create!

We are looking forward to our STEAM-STEM camp and being able to expand on the curriculum and activities that we do in a camp vs classroom setting. Your child will be excited to learn and see their friends again and make new friends. Let the fun begin! Every day will be exciting and meaningful.



A sign-up form follows this letter. Space is limited. Be sure to get your form in to us with the fee to hold a spot for your child. Each session is \$75.00 due at sign-up. If you have questions call us, email, ClassDojo, or ask at the door before or after class.

Ms. Margie, Ms. Krystal and Ms. Erica



Messiah Lutheran Preschool



CAMP ENROLLMENT FORM Deposit Paid # _____

Summer Camp (ADVENTURES with STEAM - STEM)



Price is \$75.00 per session due at sign-up.

Choices of Camp Weeks and Sessions (choose 1 or 2)

Week One July 12th - 16th AM 9-12 or PM 12:30-3:30 \$75.00

Week Two July 19th - 23rd AM 9-12 or PM 12:30-3:30 \$75.00

Child's Name _____ Birth Date _____

Preschool last attended _____

Parents' Names _____

Address _____

Phone/Cell numbers _____

Pick-up person _____ Phone _____

Pick-up person _____ Phone _____

Substitute pick-up _____ Phone _____

Emergency pickup person _____ Phone _____

Photo Permission: YES NO Permission to use full name YES NO Only first name YES NO

Can child's picture be used on ClassDojo? YES NO This is an app used for communication and pictures during our class times for parents to share the fun and info.

ClassDojo Video usage? YES NO

Can child's picture be used in Messiah Preschool Church Newsletters? YES NO

Allergies: _____

Emergency Medical Treatment Authorization/Consent Form

Please fill this form out completely

This form was completed on _____

Childs Full Name _____
Birth Date _____
Child's Age _____ Child's Sex _____
KNOWN Allergy Info _____
INSURANCE: _____

I, _____ parent or guardian of the child named above, give my permission to MESSIAH LUTHERAN PRESCHOOL, to secure and authorize such emergency medical care, emergency dental care and treatment as my child might require while under the Center's supervision. I also authorize the Center to administer emergency care or treatment as required, until emergency medical assistance arrives. I also agree to pay all the costs and fees contingent on any emergency medical care and treatment for my child as secured or authorized under this consent. **NOTE:** Every effort will be made to notify parents immediately in case of emergency. In the event of an emergency, it will be necessary to have the following information:

Name of Parent or Legal Guardian: _____
Address: _____
Phone/cell numbers: _____ Work _____
Name of Parent or Legal Guardian: _____
Address: _____
Phone/cell numbers: _____ Work _____

DOCTOR: _____
DOCTOR'S ADDRESS: _____
DOCTOR'S PHONE: _____
HOSPITAL TO CONTACT and PHONE: _____
DENTIST: _____
DENTIST'S ADDRESS: _____
DENTIS'S PHONE: _____

Physical on child completed on _____
Immunization records given to center on _____
If you child's religious affiliation is contrary to medical treatment or immunization requirements, you provided the center with a notarized statement on _____

The following individuals may be contacted in case of emergency and my child may be released to them:

NAME: _____

ADDRESS: _____

PHONE/CELL: _____ WORK _____

RELATIONSHIP TO CHILD: _____

NAME: _____

ADDRESS: _____

PHONE/CELL: _____ WORK _____

RELATIONSHIP TO CHILD: _____

NAME: _____

ADDRESS: _____

PHONE/CELL: _____ WORK _____

RELATIONSHIP TO CHILD: _____

NAME: _____

ADDRESS: _____

PHONE/CELL: _____ WORK _____

RELATIONSHIP TO CHILD: _____

Please circle your response and fill in the blank if applicable.

I do or do not give consent for my child to attend center-sponsored field trips.

I do or do not give consent for sunblock to be applied to my child's skin. If you have a preference on sunscreen, you must provide it with the child's name written on the container in permanent marker. Please list the preferred sunscreen if applicable:

I do or do not give consent for my child's picture to be taken.

I do or do not give consent for my child to be videotaped.

Parent/Legal Guardian's Signature _____ Date _____

Parent/Legal Guardian's Signature _____ Date _____

Parent/Legal Guardian's Signature _____ Date _____

Parent/Legal Guardian's Signature _____ Date _____