

# PEACE WORKS CAMP DETAILS



- What: A Woman's Place (AWP) Peace Works Camp is a one-week camp for students entering Kindergarten-6th grade. Each week is full of fun activities, games, and friendship-building exercises that promote healthy, happy, and respectful relationships while empowering students to recognize their own self-worth. Campers will receive a Peace Works Camp t-shirt as well as several handmade crafts throughout the week.
- **Dates:** Monday- Friday, June 22-26, 2020, 9:00 a.m.- 3:00 p.m.

• <u>Times</u>: Check-in/Registration – 8:45 a.m. - 9:00 a.m. Pick-up – 3:00 p.m. - 3:15 p.m.

• Location: Highland Park Community Church, 837 Hoe Rd. Levittown, PA 19056

## PEACE WORKS CAMP REGISTRATION DETAILS

# • Registration Fees:

- 1. \$125 for the first child per household and \$100 for each additional child in the same household.
- 2. A discount will be offered for children of AWP volunteers, \$100 for the first child per household and \$75 for each additional child in the same household.
- 3. Registration fee will be waived for any children of AWP clients.
- 4. A scholarship program is available; please contact Rachele Daniels at Rdaniels@awomansplace.org or 215-343-9241, ext. 114 for scholarship information.

# • Registration Paperwork:

Please complete pages 2 & 3 of this Registration Packet for <u>each</u> camper and return to **Rachele Daniels** by email Rdaniels@awomansplace.org, faxing to 215-343-341 or mailing to:

A Woman's Place Attn: Rachele Daniels P.O. Box 299 Doylestown, PA 18901

# PACE WORKS CAN

# A Woman's Place Peace Works Camp Registration Form

<u>Form</u>	NOMAN'S PLACE

#### CAMPER INFORMATION

Camper's Full Name				PEACE WORKS CAND
Camper's Birthdate/ Can			ircle one): S M ]	L XL
Camper's School	Ca	amper's Grade l	Level (as of Fall 2020)	)
Street Address		_	.pt/Unit #	
City			Zip	
Camper's Guardian Name				
Camper's Guardian Name				
Email Address				
EMERGENCY	CONTACT IN	FORMATIO	N	
In case of an emergency, please provide care physician as well as two additional 1. Physician Name	emergency contac	ets (may include		ıry
Physician Phone	_ Name of Doc	ctor's Office _		
2. Emergency Contact (after Guardian)				
Phone Please list any allergies or medical cond	itions you would l	like us to know	about:	
PAYN	MENT INFORM	IATION		
Circle all that apply to this registration for	orm:			
First Child Camper Registration: \$125		AWP Volum	teer First Child:	<b>\$100</b>
Additional Child Camper Registration: \$1	00 X		teer Additional Child	
Payment Type (please circle one): Cash	Check Visa	MasterCard	American Express	Discover
Credit Card No				
Exp. Date/ CCV (Security code o	on the back of your	r card)		

Please make checks payable to A Woman's Place.



# ACKNOWLEDGEMENT, WAIVER, & RELEASE



# <u>Please sign each section below only if you have read and agreed to each item.</u> <u>Please do not sign sections with which you do not agree.</u>

### **Authorization of Treatment:**

I hereby give my permission to the medical personnel selected by Peace Works Camp staff to order treatment and necessary transportation for my child. In the event I cannot be reached in an emergency, Peace Works Camp staff have my permission to call my child's pediatrician, and may secure and administer treatment for my child.

secure and administer treatment for my e	miu.
D. 1. (1.1.11)	Parent/Guardian Signature
the outdoor setting. I hereby affirm that reperforming camp activities. I hereby release	hazards associated with camp-related activities in my child is in good health and physically capable of ease and forever discharge the staff, volunteers, and sup- laim of liability for any damages, injuries, or medical fees at camp.
	Parent/Guardian Signature
Photo Release: I hereby give my permission for my child child's picture to be used on AWP's web	d to be photographed at Peace Works Camp, and for my site, publications, or video programs.
Release of Camper:	Parent/Guardian Signature
page one,individual(s):  First & Last Name of Campe  Name:	Telephone #: ( )
	Parent/Guardian signature
	Parent/Guardian Signature
	CODE OF CONDUCT
	camp experience for all, we require parents/guardians and ance of abiding by the following code of conduct:
my feelings calmly, and participating in	nd campers by using appropriate language, expressing activities. I understand that fighting, name-calling, I will follow all safety rules set forth by Peace Works
Camper Signature	
I agree to help my child understand and	·
Parent/Guardian Signature	Date/



## PEACE WORKS CAMP FAOS



- 1. What should my child bring? Campers should come each day with a packed lunch and water bottle. One small snack will be provided by camp each day. Due to the nature of various activities, campers are advised to bring an extra set of clothing each day. Please be sure to label any personal items with your child's name. Any items left at camp at the end of the day will be placed in our Lost & Found box and can be claimed at the Registration Desk. We ask that campers NOT bring handheld video games, MP3 players, or other electronic devices, with the exception of personal cell phones which need to be stored away during camp times 9am-3pm.
- 2. **How should my child dress?** Campers should wear comfortable clothing for summer weather (no bathing suits, please) and closed-toe shoes for safety reasons. Please remember to prepare your child with sunscreen in case of outdoor activities.
- 3. **Are there scholarships available?** AWP may be able to work with families in need of financial assistance. Please contact Rachele Daniels at 215-343-9241 ext. 114 to discuss possibilities.
- **4.** What forms are required for registration? Please be sure to complete and return pages 2 & 3 of this packet. Paperwork can be faxed to AWP at 215-343-3411 or mailed to P.O. Box 299, Doylestown, PA 18901, or emailed to Rachele Daniels at Rdaniels@awomansplace.org.
- 5. When is payment due? Payment in full is required in order to process your child's registration. Registration packets must be received by 5:00 p.m. on Monday, June 8, 2020.
- 6. What time is check-in and check-out? Check-in and registration will be held from 8:45 a.m. 9 a.m. each morning. Check-out/pick-up will be from 3 p.m. 3:15 p.m. each afternoon. Parents are expected to pick campers up on time.
- 7. What is the cancellation policy? Should you need to cancel your child's registration, please contact Rachele Daniels at 215-343-9241 ext. 114 or by email at Rdaniels@awomansplace.org no later than 5 p.m. on Monday, June 8, 2020 for a full refund. We regret that we will not be able to provide refunds after that date.
- 8. Who can I contact during the day in the event of an emergency? Please call AWP's administrative office at 215-343-9241. All messages will be immediately relayed to Peace Works Camp staff.
- 9. **Is this a religious-based camp?** Our program is not rooted in any religious teachings/ affiliations, but AWP is extremely grateful to Highland Park Community Church for the use of their facilities for Peace Works Camp. We've drawn from a variety of sources to create our weekly program and ultimately hope campers will walk away with a sense of selfworth, respect for their peers, healthy friendship-building skills, and plenty of memories!