

HEROES Summer Camp 2013

Providing Life Long Learning through Community Experiences http://heroescamp.shutterfly.com

Child's name:	DOB:
Age by June 1st: Schoo	I/District Attending:
Disabilities: 1	
Parent/guardian:	
Address:	City:
Zip code: +	lome phone #:
Cell #:	Work #:
Email address (print clearly):	
T-shirt size: How Many? Child: S M L Adult: S M L XLX	We encourage campers to wear the camp i shirt when
For which we	eks are you registering?
•	required for each week you are signing up to eserve the spot for your child.
June 24-28	July 8-12 July 15-19
July 22-26 J	Tuly 29-August 2 August 5-9
Hours of operation	n are 9:00 AM to 4:00 PM
Extended care needed: No _	June 1 st /\$380 if registered after June 1 st Yesa.mp.mboth beginning March 1 st @ http://heroescamp.shutterfly.com
Control on po and available on our website	To the property of the propert

Extended care cost is \$50/week for one time (am or pm) and \$75/week for both am and pm.	
Does your child have an attendant or nurse that you would like them to accompany them to camp? yes no Please note, the attendant/nurse will be required to attend a mandatory training at the beginning of the summer in order to accompany your child during operating hours of camp.	
In order to allow us to best meet the needs of your child, please give us a description of your child's abilities and challenges in the following areas:	
Eating (special diets, likes or dislikes)	
<u>Toileting</u>	
<u>Speech/Language</u> - please let us know what communication method is used at home and/or school. If a voice output device or a communication book is used, please consider sending that with your camper.	
Swimming (all non-swimmers are required to wear a life jacket)	
Moving about in the community (stamina, equipment needed, etc.)	

<u>Behavior</u> (we turn no student away, please be clear on any behavior we need to be made aware of; share some positive motivators and reinforcers)

Medications/Medical procedures:

(All medication dispensed during the day must be in the appropriate prescription bottle)

Any other information you would like to share

We do not turn away campers due to level of care needed. If your camper needs one on one care due to severe medical or behavioral issues, and you are able to consider an additional donation to assist in staff coverage, we would greatly appreciate it.

Mail or drop off registration and payment to:

Josh Schilling
Re: Heroes Summer Camp 2013
503 North Central Expressway
Richardson, TX 75080
Checks made payable to FUMCR w/HEROES camp in memo

Questions, Concerns, Comments? Call our Parent Liaisons!

Patti Schaub: (512)695-5486

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